

CHEMIST & DRUGGIST

The newsweekly for pharmacy

March 26, 1994

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COUNTER INSIDE



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Doctors vote for generic substitution

Tanna loses bid
to amend NPA
board rules

Berks FHSA
funds training
for 240 staff

Business in
Focus: an
ethical rethink

Unichem post
1993 results

Discpharm seek
PI price review

PAGB launches
new Code on
75th birthday

PSNI lauds
Prof Li Wan Po

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Comment

This week generic substitution by pharmacists moves a step closer with the decision by the General Medical Services Committee of the British Medical Association to accept the procedure (p500). Having written a script for a branded product, GPs will have to indicate positively to the pharmacist that the brand should be dispensed by picking a box. Failure to make this discrimination will result in generic substitution by default and the potential for a cut in the drugs bill of gargantuan proportions.

Clearly the Association of the British Pharmaceutical Industry has been caught out, despite intensive lobbying of ministers, the medical profession and patients. Not unreasonably the ABPI believed that doctors would cling to their right to prescribe whatever they wanted for any patient, despite the fact that the principle has been eroded in recent times with the Selected List. Market forces have their impact on everyone and GPs are not immune: unholding practices and doctors with indicative drug budgets have to balance the books too.

The fact is that pharmacists will bear the brunt of complaints from patients whose tablet size, shape and colour changes from pharmacy to pharmacy as different "brands" of generics are dispensed against an out-of-patent brand, perhaps a brand they have used over many years of chronic illness. Fretful patients take time to

console and convince that they are being properly treated. Although they might not understand the concept of bioavailability, their natural unease on being faced with unfamiliar medicines could soon be a reality. Last week we suggested an element of the NHS savings made by pharmacists cutting the drugs bill — either directly through GP formulary production, or indirectly through on-going advice — should be passed on for use in the pharmacy practice. Generic substitution, as envisaged, will mean that pharmacists' time and expertise will be required to substitute the medicine and inform the patient of their GP's choice. They will need an increase in dispensing fee or practice allowance through a real increase in the global sum, to reflect that extra workload.

For the industry, generic substitution presents real problems. The ABPI's argument on the threat such a policy presents is well-rehearsed but should not be ignored. Pharmaceuticals contribute massively to the balance of payments and the industry produces new chemical entities at an impressive rate. Government should not assume the ABPI is playing "call my bluff". If the UK industry is crippled by a Government seeking to keep healthcare costs down, it may find that rather than paying now to let patients live later, the reverse may result from its policy.

Doctors' vote moves generic substitution one step closer

Generic substitution by community pharmacists is a step nearer after doctors' leaders voted to support the policy last week.

The General Medical Services Committee of the British Medical Association has resolved that substitution of a generic drug for a branded product may be done when a prescription is dispensed, unless a GP indicates otherwise on the prescription form.

The Committee recognises the implications for dispensing and fund-holding doctors and for indicative drug budgets, and will be preparing guidance on these.

The move would also mean redesigning the FP10 form to incorporate the necessary tick box where the GP can effectively "opt out" of the system.

The Royal Pharmaceutical Society says the DoH has already indicated that a change in attitude to generic substitution by doctors would lead to consultation with pharmacists and the industry.

The Society emphasises the need for pharmacists to have a source of objective information on bio-availability. "Given that information source, the Society is confident that pharmacists would ensure that, if introduced, generic substitution would be carried out in a manner that



would ensure a high standard of patient care."

A DoH spokesman said generic substitution was not a new issue. The Government has been considering it for at least a decade but was not convinced it was the right way to tackle the problem.

The recent Audit Commission report on prescribing in general practice (C&D March 12, p409) came out in favour of such a system. However, a number of questions remain unanswered including whether a tick in a box on the prescription is sufficiently "tamper-proof" or whether the

doctor should sign it instead, and whether the system would place a greater emphasis on pharmacists in terms of product liability.

The move is opposed by the Association of the British Pharmaceutical Industry which estimates it could lose the industry between £500-£700 million a year and cost 5,000 people their jobs.

In a survey of ABPI members, 20 would consider a significant reduction in staffing levels, 16 would look at a major reduction in R&D spend and 15 could cancel UK clinical trials.

Patients do not object to generics

Patient resistance to generic prescribing is a fallacy, say GPs writing in the March issue of the *British Journal of General Practice*.

A six-month trial by a practice in co Durham found no evidence to "support the belief that patients object to being changed from proprietary drugs with which they are familiar to generic products."

In all, 1,917 patients were switched from their proprietary drug to the generic equivalent. Patients did not receive prior notification but a note was attached to the first repeat prescription explaining that although the drug might look different it had not been changed.

Some 90.5 per cent of these patients were still taking the generic six months later, 1.3 per cent returned to the proprietary version, while 8.2 per cent stopped medicating altogether.

Although only 13 drugs were switched to the generic version, the doctors estimate that this still saved the practice around £35,000 annually.

Boots halt Winterton collection scheme

Boots have stopped operating a collection and delivery service for the doctors' surgery in Winterton, Humberside, following a Royal Pharmaceutical Society Council recommendation.

Dispensing doctors, opposed to the recently opened Foster & Plumpton pharmacy in the village, approached Boots in Scunthorpe, eight miles away, to collect and deliver for their patients (C&D, Mar 19, p453).

The service started last week but Boots are believed to have withdrawn several days later, before the March 28 deadline for meeting Council's request.

David Newton, secretary of the Humberside Local Pharmaceutical Committee, believes the doctors have approached an independent pharmacy in Scunthorpe to take up the scheme but understands this offer was turned down.

"There is quite a groundswell

of opinion among the villagers wanting to support the pharmacy but it's been made difficult for them with this going on," he says.

Jeff Barnett, superintendent at Foster & Plumpton, told C&D: "We are getting prescriptions from residents and we are dispensing them. We are very happy that we are at last providing a full patient service to the 5,000 residents of Winterton."

A spokesman for Boots says the company was not prepared to discuss individual collection and delivery services other than to stress their belief that collection and delivery "can play a role in extending patient choice".

• Dispensing doctors in Welton, Lincolnshire, have been trying to encourage a similar service from Lincoln despite the village having its own pharmacy (C&D, Feb 12, p232). It is not known if anyone has agreed to provide the service.

Milk token progress

The Department of Health put forward new proposals for a national welfare baby milk token redemption scheme through pharmacies this week.

The first proposal from the DoH was rejected as being too complicated. Stephen Martin, Farley's marketing manager, says the latest scheme has simpler administrative arrangements and will be easier for pharmacists to operate.

The proposals are being put to the Pharmaceutical Services Negotiating Committee who will be discussing remuneration.

Men in mind

"Men in focus" is a new booklet to help men understand what can go wrong with the male genito-urinary system.

A MORI survey has shown that men feel they know little about their own health problems, with four out of five believing they take too long to seek medical help. More men in the survey knew about breast cancer and premenstrual tension than they did about testicular cancer and prostate problems.

The booklet is part of the "Better Men's Health" campaign sponsored by Merck Sharpe & Dohme Ltd, as an extension to the "Better Prostate Health" campaign started last year. Copies are available from reps or by writing to Men in Focus, PO Box 2846, Hammersmith, London W6 0ZG.

Tanna loses out in bid to revise NPA constitution

London pharmacist Ashwin Tanna has lost his bid to have the rules under which pharmacists are elected to the Board of the National Pharmaceutical Association revised.

The result of a postal ballot of all NPA members was announced at a brief extraordinary general meeting at St Albans on March 22. Mr Tanna had sought to amend Article 51(a) of the Articles of Association dealing with the election of Board members.

Article 51(a) requires Board members to be pharmacists "for

the time being actively engaged in retail pharmacy". Mr Tanna wanted to change the wording to "who practices retail pharmacy for a minimum of 16 hours a week".

The return of votes at 56 per cent shows the high level of interest NPA members have in the running of their organisation, said the Board in a statement following the result.

"In future, as in the past, NPA members will be able to vote for candidates for election to the Board in the light of their respective merits,"

Ashwin Tanna remains unrepentant over his stance, and still maintains the NPA Board is wrong in the way it currently interprets Article 51(a). However, he accepts that after the vote it is now up to the Board to do what it thinks is right, although he adds that to brush-off a substantial vote for the motion would not be the right thing to do.

"The ambiguity still remains in the rules, but I will not be taking the matter any further. I have nothing against the Board or the NPA which is doing a wonderful job," he said.

Result of ballot		
	No. of papers	No. of votes
For the motion	1,630 (48.6%)	2,010 (43.4%)
Against motion	1,711 (51%)	2,619 (56.6%)
Spoilt	15 (0.4%)	
Total	3,356	4,629

Pharmacy services get thumbs up in Cheshire

A Cheshire survey has given the thumbs up to the county's pharmacy services and has identified areas which residents feel are currently under-served.

The research involved more than 400 members of Health Watch, a panel of volunteers set up by Warrington Community Health Council.

They found that over 90 per cent of people visit a pharmacy within the space of a month and that over 90 per cent were either satisfied, or very satisfied, with the services they received.

The majority of panel members felt there were sufficient pharmacies, although three areas — Bewsey, Hulme and Orford — were highlighted as being "under-served".

Around a third of respondents were unhappy with the level of service in Rixton and Woolston, and Winwick.

When asked what was the best description of the pharmacist's role, nearly half said: "A healthcare professional with shopkeeping knowledge". A further 38.5 per cent said: "A healthcare professional" and 12.6 per cent said: "A shopkeeper with healthcare knowledge".

Only 0.2 per cent of the panel described pharmacists as "shopkeepers".

The panel was generally aware of the services provided by pharmacies with the exception of lung function tests, blood sugar level testing and guidance to nursing and residential homes.

Over half of the panel was unsure whether the pharmacy displayed information leaflets but of those who had read them, the majority found them useful.

Over 90 per cent of respondents were in favour of private rooms or areas in pharmacies, and when asked whether they would use them, 42 per cent said: "Occasionally", and 45 per cent said it would depend on the type of advice needed.

There were also votes of confidence for the accessibility of pharmacies in general, their friendly service and opening hours.

Tesco's 'fax pharmacy' seeks contract

A non-dispensing branch of Tesco in Colchester that has been faxing prescriptions to a neighbouring branch to be dispensed (C&D, Jan 22, p117), has applied for an NHS contract, five months after opening.

Essex Family Health Services Authority says the application is under discussion and should be going out to consultation shortly.

An FHSA spokesman confirmed that discussions centred around the rural area of Wivenhoe, some one and a half miles from the store. There is concern that a pharmacy in Wivenhoe may be forced to close and villagers are already set to oppose the application, spurred on by their vicar, the Rev Ann Robinson.

Dispensing doctors fight application

Two dispensing doctor practices in Kent are opposing a Devon firm's application to open a pharmacy in Higham.

The Marshlands practice, which has a satellite surgery in the village, has collected some 700 signatures from residents in a bid to block the application from the JR Group Ltd.

Doctors say they will be forced to cut services, lose staff and possibly close one of their branches if the pharmacy's application is approved.

Michael Moore, secretary of the Kent Local Pharmaceutical Committee, thinks the practice is the largest dispensing practice in the county, "but I believe that there are people in Higham who would welcome a pharmacy."

The nearest pharmacies are two and three miles away.

PSNI hears from Lewis of opportunities for change

Pharmacy must change if it is to exploit the potential of the new opportunities in health and social care. That is the message for the profession that Royal Pharmaceutical Society vice-president Anne Lewis took to Northern Ireland last week.

Pharmacists have to take responsibility for the overall management of medicines so as to reduce risks for patients. "That may mean more involvement in social care settings as well as the traditional healthcare ones — a voyage into the unfamiliar," she said.

The current POM to P switches gave the opportunity for added-value service. Pharmacists should intervene when medicines were being inappropriately used or prescribed. "Pharmacy has no right of silence," said Miss Lewis, responding to president Dr Willie Woodside's toast to the guests at the PSNI dinner last Wednesday in Belfast.

Pharmacists had a special

responsibility to high-risk groups — the elderly and those whose life depended on compliance, and in mental health and coronary heart disease. And she commended the work done in Northern Ireland, particularly on smoking cessation and audit.

Describing herself as a consumer of the "graduate product", Miss Lewis said she respected the distance learning courses developed in Northern Ireland and, in her joint accreditation visit to Queen's two years ago, had appreciated the excellent pharmacy facilities and the links between pharmacy and medicine at the University.

Anne Lewis said the links between the two Societies were valuable and important. "National policies for health affect us all. Implementation may vary in England, Scotland, Wales and Northern Ireland, but our shared experience is useful in developing a policy for pharmacy." (See also p534.)



PSNI president Dr Willie Woodside (centre right) with the chief guests at his presidential dinner at the Culloden Hotel, Belfast on March 16. From left to right are: Mat Brown, president of the Pharmaceutical Society of Ireland; Professor Li Wan Po, the Society's latest Fellow; Anne Lewis, vice-president Royal Pharmaceutical Society of Great Britain; Pat Duncan, chairman Scottish Department RPSGB, and Dr Gordon Beveridge, vice-chancellor, The Queen's University of Belfast

Berks FHSA foots training bill for 240 staff

The success of the Bracknell pharmacy assistants' training scheme has helped secure funds from Berkshire Family Health Services Authority to run more courses starting from April.

The funds, derived from the regional health promotion budget, ensure backing for 12 medicines counter assistants courses, offering a total of 240 places.

Ralph Higson, pharmaceutical advisor for Berkshire FHSA, says: "It's a brilliant result. What we might do is run this programme over the next two years."

He hopes to target the major towns in the county because one of the positive aspects arising out of the Bracknell experience was the fact that "it promoted good relations between assistants".

Ailsa Benson, head of training at the National Pharmaceutical Association, told *C&D*: "I am really pleased for Mr Higson, for the pharmacies in Berkshire and for the customers going into those pharmacies as they will get a very good service."

She hopes that assistants will take up the offer to go on a course and points out that everyone on the Bracknell scheme, from

starters to those with several years experience, said the course was "very worthwhile".

John Edwards, general sales manager for Crookes Healthcare

who sponsor the MCA courses, says: "I am delighted that an FHSA got involved in this way, and more delighted that it's a follow-up to what it did last year."

NHS fraudster is given a second chance

A Walthamstow pharmacist who cheated the NHS out of funds was given a second chance last week when he escaped having his name struck off the Register.

The Royal Pharmaceutical Society's Statutory Committee was told how Kethanbhai Vithalbhai Patel, of 75 Cranley Drive, Ilford, Essex, was arrested following a major fraud inquiry codenamed "Silverbud" in 1989.

Mr Patel, who at the time was the superintendent pharmacist and 50 per cent shareholder of Goldleaf Associates, running a pharmacy at 248 Forest Road, Walthamstow, was cleared of conspiring to defraud the NHS after a two month trial in 1991.

A year later Mr Patel was arrested when police inquiries revealed he had been claiming for "urgent" fees from the Pricing Authority. Each script so endorsed was for a member of his or the pharmacy manager's family, according to the police officer who investigated the case.

The charges under the Medicine Act related to invalid prescriptions, which were not signed by a doctor, nor dated or not stamped.

Mr Patel appeared at Southwark Crown Court on October 20, 1992, and admitted seven counts of false accounting and asked for 24 further offences to be taken into consideration. He also admitted four charges under the Medicines Act and asked for 36 other offences to be considered.

He was fined a total of £3,050 and ordered to pay £383 in compensation to Redbridge & Waltham Forest FHSA for fees wrongly claimed, and £1,500 towards prosecution costs.

The offences covered two years from 1987. In April 1993 the pharmacy was transferred to Waterman (UK) Ltd with Mr Patel as superintendent pharmacist.

Mr Patel lost some £50,000 because his accounts were frozen from November 1989 to December 1991, said his counsel Mr Paul Purnell. The urgent prescriptions were for necessary family medicines, the dishonesty lay in delaying dispensation until Sundays to receive extra cash.

Announcing the Committee's decision, chairman Gary Flather QC said they would dispose of the case by way of a reprimand, although initially they felt the

offences rendered him unfit to be on the Register. The change of heart was largely because of the delay since he was first arrested and his financial loss, estimated to be almost £50,000.

Rugby cause of lack of supervision

A Swansea pharmacist was found guilty of misconduct last week after she left her pharmacy unsupervised because she could not find staff to work during a Welsh rugby international.

Mrs Nasreen Kausar Ali, of 23a Tavistock Road, Sketty, Swansea, told the Statutory Committee she "panicked inside" when she realised her unqualified husband had sold a Pharmacy medicine when she was not in the store.

Mrs Ali, who owns two pharmacies in Swansea, at 86 Newton Road, Mumbles, and at 122 Penygraig Road, and a third with her family at 34 High Street, Gorseinon, was fined £1,410 and ordered to pay £800 at Swansea Magistrates Court on May 26 last year after admitting to the offence at the Mumbles pharmacy.

She told the Statutory Committee that she was unable to find a locum for the Gorseinon shop because of the rugby match. She left her husband in control so she could supervise the other store.

The Society's solicitor, Mr Josselyn Hill, said that when an inspector appeared at the Mumbles Pharmacy on November 21, 1992, Mr Ali's husband sold him the medicine. When he asked where the pharmacist was, he said she had gone shopping. The inspector was suspicious and went to Gorseinon where he found Mrs Ali, who admitted that there was no pharmacist at Mumbles.

Mrs Ali assured the inspector that was the only lapse but when checks were made, she later admitted there was no pharmacist at Mumbles on three occasions in October 1992.

Chairman Gary Flather QC said since Mrs Ali was absent for long periods "there is an absence of personal control which is culpable and which amounts to misconduct".

Script charges

Regulations increasing prescription charges to £4.75 from April 1 have now been published. The charge for an elastic stocking goes up to £4.75, while a pair of tights cost £9.50. Pre-payment certificates go up to £24.60 for four months and to £67.70 for six months. *The NHS (Charges for Drugs and Appliances) Amendment Regulations 1994 (SI No 690, Scotland No 697 or S34; HMSO £1.10).*

CD fees up

The fees for licences to produce, supply or possess Controlled Drugs are increased by about 10 per cent from April 1 under *The Misuse of Drugs (Licence Fees)(Amendment) Regulations 1994 (SI No 535; HMSO, £0.65).*

NHS revenue

The total amount of revenue raised in England in 1992-93 from charges to patients within the NHS was £844,17 million. The figure includes prescription and dental charges, welfare baby milk, charges to patients in both NHS trust hospitals and directly managed units.

Who takes medicines

Over one-third of adults were taking prescribed medicines, when questioned in a health survey carried out by the OPCS. More women (42 per cent) than men (32 per cent) were taking prescribed medicines. *Health Survey for England 1992 (HMSO, £27.50).*

PSG chairman

The chairman of the Pharmacy Support Group is Hemant Patel and not Gerald Zeidman, as stated in *C&D* last week p453.

Temazepam thefts cause for concern

The growth in the number of thefts of temazepam from pharmacies, particularly in North East England, was highlighted in the Commons on Tuesday.

Ms Joyce Quin (Lab Gateshead East) said there had been an alarming number of thefts. Calling on the Government to review the use of such drugs, she said people were getting "high" through using temazepam with alcohol and other substances.

Dr Brian Mawhinney, the Health Minister, said the problem was causing concern in the Gateshead area. He stressed the need for pharmacies to take adequate precautions to ensure that drugs were safely stored.

He explained the cost of providing secure storage reflected in the global sum available for pharmacists' pay.

Florence supports pharmacy

Professor Alexander Florence, Dean of the School of Pharmacy, University of London, has pushed the role of pharmacists in the NHS drugs debate in a letter to a national newspaper.

The letter, published in *The Independent* (March 16), replied to earlier letters from Drs Ian Bogle and Ian McKee, and called for an "informed and urgent" inquiry with the medical and pharmaceutical professions, the pharmaceutical industry, patients and the Government.

Accusing pharmacists of an "evil interest" in seeking additional dispensing fees by limiting the number of days treatment on a prescription would not help, he said.

"To exclude pharmacists, who are highly trained in matters which inform the industrial, clinical and therapeutic debate, as well as understanding fully the issue of generic medicines, would be folly," said Professor Florence.

"New methods of payment of pharmacists, such as the Dutch method of capitation fees, would remove any doubt about the monetary interest and allow the true potential of pharmacists as independent arbiters of quality to be realised."



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RECKITT COLMAN

Roll on the next general election!

I appreciate that the Editor waxed eloquent in last week's C&D but I still cannot remain silent in my anger against the insulting arrogance of the Department of Health over its offer to community pharmacists for this year's pay round.

All health professionals are treated with scant respect by the Department but pharmacists are treated the worst of all and this must surely be in the knowledge that we are also, politically, the weakest. I work harder and harder for less and less yet my reward is a derisory 2 per cent. So much for productivity!

Yes, the Government does hold all the aces because it is a monopoly employer but that makes our continuing iniquitous treatment all the more immoral. For the moment my anger can only be targeted towards a deliberate campaign of non-cooperation, but when I am allowed to express my opinion at the ballot box then I trust my vote will not be the only one cast by a pharmacist which will help relegate this administration to where it belongs, many years of disgrace on the opposition benches.

Block vote blocks success

The recent local pharmaceutical committee elections were more actively fought than those for many years. The cynical might comment that this was merely a by-product of political discontent but the resulting new blood must be good for the future of community pharmacy.

At the same time employee elections were also held with, if anything, even more member interest. But here there

appears to be a problem because, in some areas, however active an individual may be, if they are not employed by one of the large multiples the effective block vote ensures they will never be elected.

This is a disturbing trend because it cannot be to the advantage of all contractors for employee representation to be solely in the hands of the large multiples, particularly as they are already represented by appointment through the Company Chemists Association. The answer may be to replace this appointment system by two sets of employee elections. One from within the membership of the CCA would ensure continuing CCA representation while the other, from the remainder of employees, would allow those enthusiasts presently being shut out a fairer crack of the electoral whip.

Boots — please 'look again'

It is bad enough for pharmacists to have to fight dispensing doctors in order to practise their own profession without those who manage to push back the tide being undermined by urban pharmacies which appear to co-operate with unnecessary collection and delivery services.

I also find it regrettable that often the culprits are Boots whose aggressive commercialism has become so well known in the last few years. The latest case is in Wiltshire where it is reported that their Salisbury Branch is co-operating with a publicly-antagonistic doctor dispensing practice which is upset over a newly-opened rural pharmacy (C&D March 19, p453).

Boots might say that this is a situation not of their own making — any other pharmacy, multiple or otherwise, might have been selected — but the local GPs

must be laughing their socks off over the vision of a competing pharmacy helping them to close down such a hard-fought-for rural pharmacy and thus perpetuating doctor dispensing. I trust Boots will very rapidly "look again" at this situation as they have done in Winterton, Humberside.



Fighting the good fight

I am always prepared to campaign on behalf of good causes and what better cause than the future of community pharmacy? If the present furor which has erupted over the decision of the Royal Pharmaceutical Society's Council to delay elections for committee members of the new Community Group (C&D March 12, p430), has any truth in it, then sectional self-interest in Lambeth is trying to suffocate this fledgling before it can properly mature.

The Group has been poorly promoted and is the only one to require a joining fee but large application forms were printed in three editions of the *Pharmaceutical Journal* during January so all pharmacists were given adequate opportunity to join.

As it is the Group does exist and cannot be destroyed unless it lacks support from its own members. The demonstration of that support is very simple and the best riposte to all its critics. So swallow your pride, fill in your application forms and send in your tenners. Not tomorrow, not next month, but now, and in such a deluge that no one in Lambeth will be able to deny the level of support for the Community Group.

Peston urges economic research

If more economic research on community pharmacy is not carried out it will become ever more difficult to counteract the Department of Health when it decides to cut expenditure on pharmacy services, Lord Peston, a Privy Council member on the Royal Pharmaceutical Society's Council, has warned.

Little work has been done because there are no researchers in this field in the schools of pharmacy, he told the Eastbourne Branch of the Society last week.

He said that, because of the restraints on public expenditure recent moves towards a four year degree course are unlikely to bear fruit in the next few years. He also warned that because of the increase in the number of pharmacy graduates soon to be entering the jobs market, some will have to consider non-pharmaceutical employment.

GPs seek aid with private scripts

Doctors leaders have again asked the Department of Health to clarify GPs' terms of service on issuing private prescriptions for NHS patients.

Lawyers advising the General Medical Services Committee maintain that the current wording indicates that a GP could be in breach of his terms of service for failing to use an NHS prescription form to order necessary treatment for an NHS patient. The DoH does not agree.

Because of concerns, the GMSC has again asked the DoH to clarify the position by issuing an appropriate amendment to the terms of service (paras 43 and 44).

Fakes often 'diverted'

The Department of Health receives 20 to 30 reports of counterfeit medicines in the UK each year. The products are usually major brand leaders or more recently, anabolic steroids.

Eighty per cent of reports relate to "diverted" products, junior Health Minister Tom Sackville said in the Commons last week. These are products legally manufactured but diverted to the UK from other markets.

Two counterfeiters have been detected so far this year. All reports are investigated by the enforcement unit of the Medicine Control Agency, the Minister told Tory MP David Nicholson.

Topical REFLECTIONS

THE POLLON~EZE™ NEW DRIVE



IT'S AN EYE-OPENER!

This summer both you and your customers will see an amazing new drive behind **Pollon~Eze**, supported by Centra Healthcare - a major new force in OTC with a dedicated commitment to pharmacy.

Look at the Pollon~Eze drive for relief.

A non-drowsy modern hayfever treatment that provides 24 hour relief in a convenient one-a-day calendar pack.

Look at the Pollon~Eze special strengths.

It's clearly and powerfully branded for the growing OTC hayfever market. It contains a compound with

proven Rx and OTC heritage and it offers you excellent profitability.

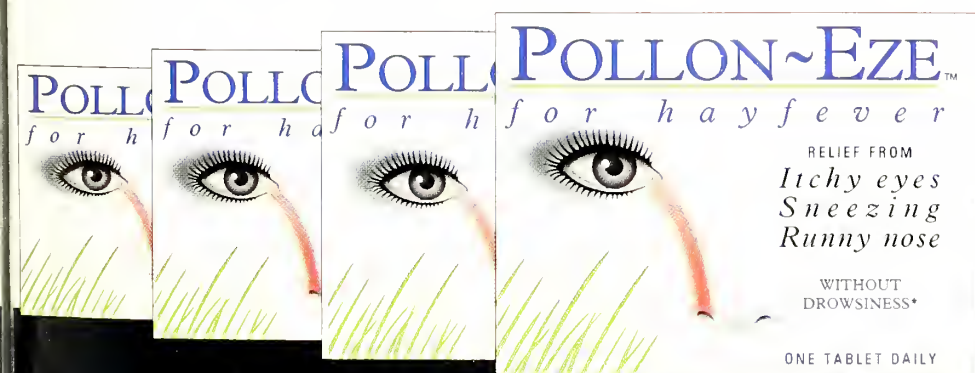
NOW look at the Pollon~Eze new drive to support your business.

We've a new £3¼ million national radio advertising campaign to cover the whole hayfever season. Sponsored radio pollen count slots. Striking new point of sale. A bright new consumer leaflet. Plus special pharmacy training support all dedicated to supporting your pharmacy business.

Make sure you're fully stocked up for the Pollon~Eze new drive.

Talk to your Centra Healthcare representative or telephone 0494 450778.

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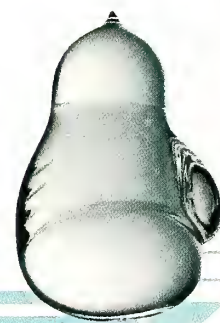
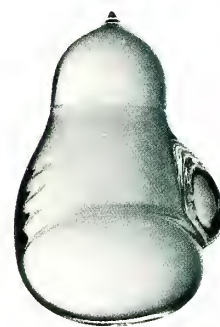
Lypsyl Cold Sore Gel with three active ingredients.

The quick
way to help
knock out
cold sores.



Lypsyl Cold Sore Gel is a heavyweight treatment, because it packs three punches. • An Antiseptic to fight infection, an Astringent to dry up the sore and an Anaesthetic to relieve the pain. • And it's this unique 3-pronged attack that helps rapid healing of cold sores, while giving symptomatic relief from discomfort and pain. • A technical

knock-out, you might say. • So to take on cold sores, give your customers Lypsyl Cold Sore Gel. It comes out fighting



Zyma
Healthcare

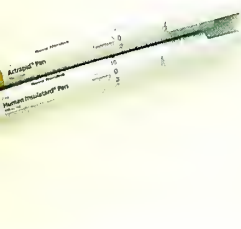
Scriptspecials

Penmix insulin pens extended

Actrapid is a short acting insulin with a rapid onset of action that lasts for up to eight hours. Human Insulatard is an isophane insulin with an onset of action of one and a half hours and a duration of action of approximately 24 hours.

Preloaded insulin pens remove the need for conventional syringes and needles and reduce dosage errors. A trained nurse is able to fill a syringe within 5 per cent of the desired quantity. However, the error rate can be as high as 20 per cent among diabetic patients over 40 years of age.

Preloaded insulin syringes can deliver up to 78iu in a single injection so are also suitable for people using large daily doses of insulin. **Novo Nordisk Pharmaceuticals Ltd. Tel: 0293 613555.**



Actrapid Pen and Human Insulatard Pen are the two latest additions to the range of PenMix pens which are preloaded with a range of premixed insulins. Actrapid Pen and Human Insulatard pen are available in packs of 5 x 300iu at a basic NHS price of £26.33



Cardilate MR 20 mg is a new product from H.N. Norton. Each modified release tablet contains 20mg nifedipine and the dissolution rate means that twice daily (12 hourly) administration is usually possible (10 x 10 blister pack £18.35 basic NHS). H.N. Norton & Co. Ltd. Tel: 0279 426666

Tegretol additions

Two new suppository presentations of Tegretol are now available in 25mg and 250mg strengths (packs of five; 125mg £7.50, 250mg £10.00). Ciba. Tel: 0403 272827.

Fibracol — new sizes

Fibracol collagen alginate dressing is now available in two new sizes — 5 x 5cm (cases 5 x 10, £49) and 10 x 20cm (cases of 5 x 5, £90). The small size will be useful for foot ulcers, heel pressure sores and toe nail beds. The larger size can be used for larger leg ulcers, pressure sores and minor burns. &J Medical. Tel: 0344 872626.

PSNC news

March scripts for pyridoxine tablets 50mg have been re-classified as

category D. In the absence of an endorsement, such products are priced as in Part VIII of the Drug Tariff. However, pharmacists will be paid on the basis of endorsement if the Tariff price cannot be met. The situation will be reviewed at the end of March.

Steroid alert

The MCA has discovered counterfeit and contaminated injections of anabolic steroids in the UK. The injections are not sterile and do not contain the active ingredient in the amount stated. The products, labelled "Winstrol Depot 50 Injection (stanozolol 50mg)" with batch numbers B460 and H420, are thought to be on sale through fitness clubs and gyms.

Medical Matters

Call for a register of Norplant users

Women given Norplant, a progestogen implant which provides contraception for up to five years, should be entered on a register, says the latest *Drug & Therapeutics Bulletin*. "This would ensure that women can be contacted if any unexpected effects develop and that they can be reminded to renew their contraceptive after five years."

The Family Planning Association says a register is not a practical idea. A spokeswoman says a "far more productive message to get across to women using any form of contraception is to keep in close contact with the medical service and have regular check ups." A register would raise the issue of personal information being kept on file depending on the form of contraception used.

The FPA response was echoed by Roussel who says: "It is not practical, or clinically necessary and it raises the issue of invasion of privacy".

The D&TB highlights the manufacturer's recommendation that the woman should be seen by her doctor three months after insertion and then once a year, a detail which does not appear on the Norplant Data Sheet.

Roussel say this information was not a condition of the product licence and they are recommending it as good clinical practice that could be applied to other methods of contraception.

The *Bulletin* also calls for more published data on the short and long-term clinical effects of the tubes now being used. They say much of the published data was

carried out using denser and less flexible tubes. There is concern that a change in formulation has been introduced with so few published data.

Roussel say there is substantial unpublished evidence on the improved version. The Medicines Control Agency granted the UK licence for the softer tube based on the total evidence, as did the American Food and Drug Administration in 1991. The soft tubing has been used since 1982.

The price of Norplant in the UK is £179, plus the costs of counselling, follow-up, insertion and removal. If used over five years the cost per cycle is similar to that of a "third generation" low dose combined oral contraceptive pill. However, between 25 and 55 per cent of women do not continue using Norplant for the full five years, with the mean continuation time being three and a half years, making it a less attractive option financially.

Safe delivery of beta₂ agonists

The mode of delivery of beta₂ agonists is a factor in determining their safety in asthma.

A meta-analysis of six studies with over 1,700 patients, carried out by Dr Brian Mullen of the American Lung Association, concluded that oral or metered dose inhaler administration of beta₂ agonists is not associated with death from asthma. His analysis shows there is a significant, but very weak, link between mortality and therapy given by a nebuliser.

Administration of beta₂ agonists via a nebuliser is usually reserved for the most severe, intractable cases of asthma and Dr Mullen said the link was probably an "artefact of the underlying asthma severity".

Beta₂ agonists and their efficacy and safety in asthma has been the subject of considerable debate. A recent study, published in the *New England Journal of Medicine* concluded that there was a significant association between asthma deaths and the use of beta-agonist aerosols. The issue was well reported in the medical and lay Press.

Lagap additions

Lagap is extending its generic range with three new products — flurbiprofen 100mg (100 £15.75) and 50mg (100 £8.35) and terfenadine 60mg (60 £5.60). Lagap. Tel: 0420 478301.

Cyproterone 50mg

Generics UK have introduced the first generic cyproterone 50mg tablets. They are white tablets, marked CY with a breakline on one side (56 £32.20 basic NHS). Generics UK. Tel: 0707 644556.

DF 118 Forte

DF 118 Forte tablets are available in containers of 100 tablets (NHS price £12.05), not 10 as stated last week. Napp. Tel: 0223 424444.

Counterpoints

Heinz spring into bottled water

Heinz are introducing Pure Spring Water for Babies in April.

The company claims that 70 per cent of babies receive plain water or herbal drinks at six months of age. However, health professionals recommend that adult bottled water needs to be boiled to remove harmful minerals and bacteria.

Heinz's water is bottled at source in Scotland with pharmaceutical standards, says the company. All bacteria and minerals are removed by filtration.

In addition to being sterile, the product has another selling point: it comes complete with its own sterile teat and snap ring at the base of the bottle allowing it to be used straight away.

From birth, babies need extra fluids. "Milk provides food as well as fluid, and is not always suitable for babies who are just



thirsty," says category manager Roger Hobbs. Boiling and cooling water before babies drink it is inconvenient, he says.

The water is available in single serving 225ml plastic bottles, retails at £0.49 and is packed in

outers of 12.

The launch is supported with advertising in the mother and baby Press, scheduled to break mid-May, a direct mail campaign, and samples in Bounty. **Heinz. Tel: 081-848 2386.**

Great days out with Beconase Hayfever

Bekonase Hayfever training packs are being sent out to all pharmacies.

For pharmacists, the pack incorporates two workbooks. The first considers hayfever and seasonal rhinitis, while the second examines Beconase Hayfever's role in the management of these conditions. Both come complete with a series of self-assessment questions. A recommendation kit and video are also available.

Assistants are given a simplified version of the pharmacist's modules. In addition, they could win a selection of "Great Days Out" vouchers by completing a multiple-choice questionnaire. The first 10,000 entries with over 80 per cent correct answers will win ten discount vouchers for 100 tourist attractions.

Warner-Lambert. Tel: 0703 620500.



Token scheme is babycare's white hope

Pharmacies other than Boots have had a disappointing year in most babycare sectors, according to Farley's 1994 Market Report.

The one white hope on the horizon is the potential £30 million worth of babymilks business likely to be transferred from clinics to pharmacies as the national

token redemption scheme gets underway.

But marketing manager Stephen Martin warns that the multiples will be looking to maximise this business. If independents want "a fair share of the action" they need to stock all the major brands and make sure staff are well-trained to give advice.

The report says that the

market for all baby consumables reached £865.9m in 1993, up 2 per cent year on year (FSA figures), although volume declined. It was a difficult year, with a fall in the birthrate and effects of the recession slowing down what had been an expanding market.

But Mr Martin believes that 80 per cent of the potential births postponed because of the recession will occur over the next two to three years if the economic situation continues to improve.

Grocers account for nearly half the total market and Boots 23 per cent, while other chemists declined 8 points to 12 per cent.

The total babyfeeding market reached £262m, a 3 per cent growth, with milks up 3 per cent to £116m and meals up 6 per cent. Follow-on milks was the best-performing sector in foods, increasing by 67 per cent in volume and 80 per cent in value to £18m.

Babymeals increased 6

per cent to £121m. Dry meals at £50m showed a slight increase in value but 7 per cent decline in volume. Wet meals put on 9 per cent to £70m while volume remained static.

The report says the toddler market has been slow to take off, as mothers seem more interested in moving their babies on to family meals rather than this interim stage.

Drinks are still in decline and dropped 12 per cent in volume, 10 per cent in value to £21m.

For the future, the report predicts that grocers will continue to make gains at the expense of pharmacies. The feeding market will continue to polarise to a few major players, while Boots own brand will strengthen further but not at the same high rate as last year.

● Farley's are adding long chain polyunsaturated fats to their pre-term formula Osterprem from April. **Crookes Healthcare. Tel: 0602 507431.**

Pollon-eze and Arret to Centra

The sales and marketing of Pollon-eze and Arret have moved to Centra Healthcare, the Johnson & Johnson and Merck, Sharp & Dohme joint venture company.

To mark the occasion, Centra are offering pharmacy assistants the chance to win one of 30 £100 prizes of Forte Leisure vouchers with Pollon-eze. Meanwhile pharmacists will receive PoS material including window, counter and shelf items and leaflets.

Pollon-eze is being supported with a radio campaign targeted at 16-35 year olds, estimated to account for over 50 per cent of hayfever sufferers.

Arret will be supported with a Press and poster campaign throughout the Summer with pharmacists receiving bonus offers and point of sale material. **Centra Healthcare. Tel: 0494 450778.**



Centra have unveiled a comprehensive range of pharmacy point of sale material, scheduled to go out at the end of March. Items available include a window display unit, a choice of counter units, showcards, shelf edgers and wobblers, mock-up display pack and consumer leaflets. Pharmacists wishing to obtain materials quickly should contact Centra Healthcare. Tel: 0494 450487

"I'll make your cash register ring." Now can I ask a favour?"

This actress is appearing in a multi-million-pound consumer campaign for Canesten 1 pessary. Added to Canesten's prescription heritage and its already dominant position in the market, this campaign is bound to increase your sales. Now, there is one problem you can help us with.

We've found out that many thrush sufferers use just one kind of Canesten, the 1% Cream, designed for external use only. But first and foremost, they need to treat the cause of thrush, which as we know is inside the vagina. The one to recommend for that is Canesten 1 pessary (or 10% VC, for women who have vaginal dryness problems). It starts working immediately and clears all the symptoms within three days.

So please recommend Canesten 1 pessary – and display our point-of-sale materials prominently.

Canesten[®]1 Pessary
CLOTRIMAZOLE VAGINAL TABLET

Treat the cause, not just the itch

Information
Canesten 10% VC is available as a single pre-filled applicator containing 5g of 10% clotrimazole vaginal cream. Canesten 1 is available as a single vaginal tablet containing 500mg clotrimazole and an applicator in which to place the tablet.
Indication: Canesten 10% VC. **Dosage and Administration:** Canesten 10% VC. Adults. Insert the contents of the pre-filled applicator intravaginally, preferably at night. Canesten 1. Adults. Place the Canesten 1 vaginal tablet in the applicator, and insert intravaginally, preferably at night. Children. Since both of these products are used with an applicator, paediatric usage is not recommended. **Contra-indications:** Hypersensitivity to clotrimazole. **Side-effects:** Rarely patients may experience local mild burning or stinging immediately after inserting the cream. Hypersensitivity reaction may occur. **Use in Pregnancy:** In animal studies clotrimazole has not been associated with teratogenic effects but following oral administration of high doses to rats there was evidence of foetal loss. The relevance of this effect to topical application in humans is not known. However, clotrimazole has been used in pregnant patients for over a decade without attributable adverse effects. It is therefore recommended that clotrimazole should be used only when considered necessary by the clinician. If used during pregnancy extra care should be taken when using the applicator to prevent the possibility of mechanical trauma. **Accidental Oral Ingestion:** In the event, routine measures such as gastric lavage should be performed as soon as possible after ingestion. **Pharmaceutical Precautions:** Canesten 10% VC. Do not store above 25°C. Canesten 1. No special storage precautions are necessary. **Legal category:** P. **Retail Selling Price:** £5.95 for each product. **Lottery Number:** Canesten 10% VC. PL 0010/0136. Canesten 1. PL 0010/0083. **Date of Preparation:** August 1992. **Further information available from:** Bayer plc, Pharmaceutical Division, Bayer House, Strawberry Hill, Newbury, Berkshire, RG13 1JA.



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THE LIBERATOR



PEPCID AC (Abridged Product Information) Product Information - PEPCID AC: Film coated tablets containing famotidine 10mg. **Pack Size:** 2, 6, 12. **Dosage:** Adults and children over 16 years: 1 tablet for symptomatic relief or 1 tablet taken one hour before food or drink known to provoke symptoms. Maximum intake 2 tablets in 24 hours. Maximum period of use 2 weeks. **Uses:** For the short term symptomatic relief of heartburn, dyspepsia and hyperacidity. **Contraindications:** Hypersensitivity to any component. **Warnings and Precautions for Use:** Should not be taken unless advised by the following patient groups: moderate renal failure or severe hepatic impairment; unsupervised for any other illness or need for any other medications; middle aged or over recently changed dyspeptic symptoms, or associated unintended weight loss. Patients with symptoms or difficulty swallowing should seek medical advice. **Drug Interactions:** No drug

R GOES O.T.C.



FREEDOM FROM EXCESS ACID

Now, for the first time you can recommend famotidine. One small tablet can control your customers' excess acid for *up to 9 hours*.¹ To liberate them from the pain and discomfort of heartburn, dyspepsia and excess acid.

The OTC H₂ antagonist with no drug interactions of clinical significance

You can recommend **Pepcid AC** with confidence in the knowledge that it has an excellent safety profile. Famotidine does not produce any interactions of clinical significance with other drugs.

Pepcid AC is effective in keeping pain at bay at any time of the day or night, and can even be taken by sufferers in advance of the particular food or drink which normally provokes their "acid problem".

A massive £5 million Pepcid[®] AC launch campaign

Soon everybody will be talking about **Pepcid AC**, thanks to massive national TV and press advertising. This will be co-ordinated with innovative professional programmes - to encourage product awareness in pharmacies and pharmacy referral from GP's.

Dedicated pharmacy-only support

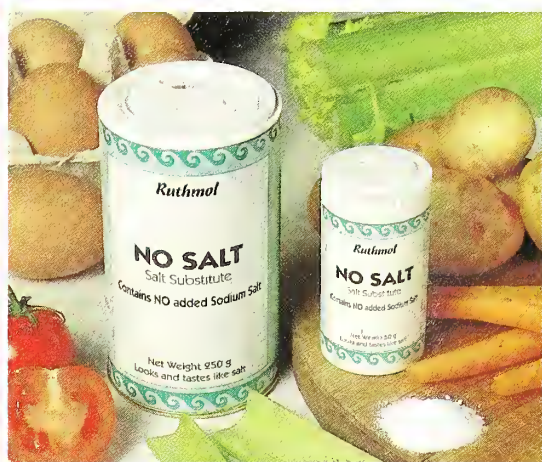
You'll receive all the back-up you need, including full clinical back up support, powerful in-store displays and promotions plus extensive consumer information. In fact, everything you could ask for to ensure **Pepcid AC** has a truly liberating effect on your sales.


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HEALTHCARE
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CONSUMER PHARMACEUTICAL COMPANY

UP TO 9 HOURS GASTRIC ACID CONTROL FROM ONE SMALL EASY TO SWALLOW TABLET

Significance have been identified. **Side Effects:** Generally well tolerated. Headache and have been reported at a frequency $\geq 1\%$. Other side effects, including dry mouth, nausea, diarrhoea, fatigue and allergic reactions occur even less frequently. **Pregnancy:** Not for use in pregnancy. **Overdosage:** No experience to date with overdosage. Doses up to 120 mg for over 1 year were well tolerated in patients with severe hypersecretory conditions.

Product Licence Number: PL 0025/0312. **Product Licence Holder:** Merck Sharp & Dohme Limited, Hertford Road, Hoddesdon, Hertfordshire, EN11 9BU. **RSP:** 2 tablets £0.75, 6 tablets £1.99, 12 tablets £3.59. **P** Pharmacy only distribution. **Distributed by:** CENTRA HEALTHCARE, Enterprise House, Loudwater, Bucks, HP10 9UF. **References:** 1. Data on File. [®] Indicates registered trademark of Merck & Co., Inc., Whitehouse Station, N.J., U.S.A. © Centra Healthcare 1994. All rights reserved.



Cantassium's salty relaunch

No Salt Ruthmol is being relaunched by Cantassium. The salt substitute has been reformulated to taste exactly like salt, says the company.

It retails at £0.65 (£0.49 trade) for 50g and £2.70 (£2.03) for 250g. It is available from **Larkhall Natural Health**. Tel: 081-874 1130.

Win a dream car

Cash prizes and three gold VW Beetle convertibles are up for grabs in a promotion for Werther's Original sweets.

Pharmacists can claim £5 cash by collecting tokens on Werther's outlets and attaching them to collector cards.

Some 50 pharmacists have the chance to win

£50 if they find a Beetle token on outers of the 150g bags.

Consumers have the chance to win one of three VW Beetles. One of the cars will be on display in shopping centres throughout the country to promote the competition. **Jenks Group**. Tel: 0494 442446.

Clarins revitalise

Clarins have relaunched their Revitalising Tinted Moisturiser (50ml £14.50) with new-look packaging and improved shades.

New colours of the moisturiser, now available, are Blond, Dore, Camel and Havane. **Clarins Ltd**. Tel: 071-629 2979.

April showers

Potter & Moore are adding moisturising cream shower lines to their Chintz, Peach Botanicals and Rose Luxury collections.

They come in flip top containers with a hanging loop and retail at £2.99 for 200ml. **Potter & Moore**. Tel: 0733 281000.



Unipath are introducing new display material to boost Clearblue One Step's shelf impact in pharmacies. This includes a two-tier product dispenser, which holds six packs, plastic shelf wobblers, on-shelf leaflet dispensers and information leaflets giving answers to common questions about pregnancy and pregnancy testing kits. **Unipath**. Tel: 0234 347161

Botanical haircare enters UK

Nova Hair & Care are introducing a range of botanical haircare products into the UK after their success in the US.

All products are free from animal ingredients and described as cruelty-free. They come in brightly-coloured packages with illustrations of key ingredients.

The 13-product range includes shampoos and conditioners at £3.99, styling products at £3.79, and a hot oil treatment, also at £3.79.

Shampoo variants are Strawberry Creme, to wash away product build-up; Apple Nectar, to thicken hair; and the moisturising shampoos, Hawaiian Ginger and Botanical Therapy.

There are Apple Nectar and Humectant conditioners, as well as Humectant Plus and Hair Infusion. For intensive conditioning, there is a hot oil treatment with marigold, wheatgerm and hazlenut oil.

Styling products comprise a Curl Control Volumiser, a Mega Hold Styling Gel, a Freeze Spritzer and a Forming Spritzer. **Fragrant Memories**. Tel: 0342 313206.

Clearview guide

A technical guide answering commonly asked questions about pregnancy tests has been produced for pharmacists by Clearview HCG.

The laminated pocket-sized card gives details on how Clearview HCG is used and considers factors such as abortion or miscarriage which can affect HCG levels.

Further advice can be obtained from the direct advice line number printed on the reverse.

Copies of the guide are available from **Unipath Limited**. Tel: 0234 347161.

Kodak Ektar extra

Consumers can get a 36-exposure Kodak Ektar 100 film for the price of a 24-exposure film (£3.79). The offer is available from April 11 until July 31. **Kodak**. Tel: 0442 61122.

On TV Next Week

GTV Grampian	C4 Channel 4	STV Scotland (central)
B Border	U Ulster	Y Yorkshire
BskyB British Sky	G Granada	HTV Wales & West
Broadcasting	A Anglia	M Meridian
C Central	CAR Carlton	TT Tyne Tees
CTV Channel Islands	GMTV Breakfast	W Westcountry
LWT London Weekend	Television	

Baking Soda toothpaste:	CAR, BskyB, C4, GMTV
Bodyform Invisible:	All areas
Colgate Precision:	All areas
Colgate Total:	All areas
Gliss Corimist:	C4, GMTV
Jordan Magic toothbrushes:	GMTV
Listerine:	All areas
Neutrogena T-Gel:	HTV, G, C4, STV, M
Nicotinell:	All areas
Proflex:	C, M, C4, A, HTV
Radox herbal bath:	All areas except CTV, GMTV
Rennie Rap-eze:	GMTV, BskyB
Remegel:	All areas except CTV
Solpadeine:	GTV, STV, B, G, Y, TT
Summers Eve:	C, M, CAR
Vaseline Intensive Care:	All areas

J&J change sizes

Johnson & Johnson are replacing their existing pack sizes of baby wipes and pH 5.5 Bath Foam.

The 42-pack of wipes will be replaced with a 40-pack from the start of April, while the 84-pack and 84-refill pack will both be replaced by 80-packs from May 1.

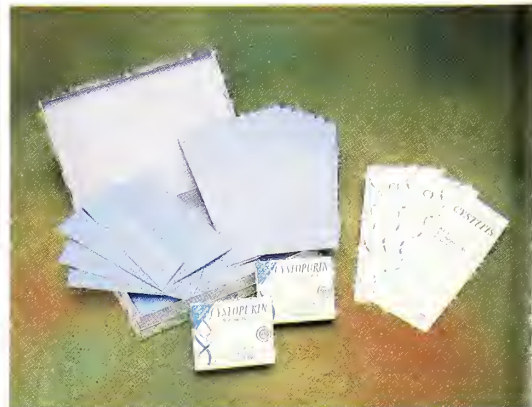
The pH 5.5 Bath Foam is also moving up from a 250ml size to a 500ml on May 1. **Johnson & Johnson**. Tel: 0628 822222.

Unichem offer free D&P

Unichem are offering customers the chance to get one film developed free of charge.

Consumers must collect two promotional tokens from their 6 x 4in colour processing orders. Each order received until April 30 will include a token valid until May 31.

Participating pharmacies will receive POS material including a poster and board overlay. **Unichem**. Tel: 081-391 2323.



Cystopurin is being promoted with two offers for pharmacists this Spring. With orders for two cases of product, placed through Roche, pharmacists get a free writing set. In addition, a new counter unit is available, holding six units and consumer leaflets on cystitis. **Roche Consumer Health**. Tel: 0707 366000

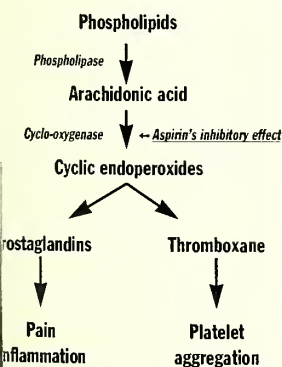
Aspirin's increasing role in the management of vascular disease

Aspirin is arguably the oldest and most widely used analgesic in the world today. It has become a household name in the treatment of everyday pain and is renowned for its effectiveness in reducing inflammation and fever. But there's much more to aspirin than its characteristic analgesic, anti-pyretic, anti-inflammatory effect because researchers are still finding amazing new clinical indications for this remarkably versatile drug.

Aspirin and prostaglandins

Prostaglandins are the key to aspirin's therapeutic success. Aspirin works by inhibiting the formation of prostaglandins, biochemical mediators with a diverse spectrum of physiological functions. Prostaglandins, for example, are responsible for the 'inflammatory response' – the characteristic pain, swelling, redness and heat that accompany tissue damage. They also cause blood clotting by encouraging platelet aggregation.

The prostaglandin pathway



Medical attention is now turning to even more profound indications of aspirin's prostaglandin-inhibiting effect. Vascular thrombosis is caused by a prostaglandin-like substance called thromboxane, which stimulates platelet aggregation. Aspirin can prevent thrombosis, thereby influencing the course of vascular disease, most significantly in heart disease.^{1,2}

Preventing acute heart attack

It is now a well established fact that aspirin saves lives. This has been proved in a recent major study.³ In 1988, the benefit of aspirin in preventing death from acute heart attack was dramatically demonstrated

"For every 1,000 patients admitted to hospital with acute myocardial infarction, about 100 can be expected to die within 35 days. From the results of ISIS-2, the use of full dose aspirin immediately would prevent 23 of these premature deaths."³

in the second International Study of Infarct Survival (ISIS-2)³ among 17,187 people, administered either placebo or half an aspirin tablet within 24 hours of their first symptoms. The aspirin group experienced 23% fewer deaths than the placebo group, a significant result which was reinforced in 1992 by ISIS-3⁴ (involving more than 62,000 patients), and again in 1994, by one of the most comprehensive overviews of all the evidence to date.⁵ Such findings question the ethics of not using aspirin in these circumstances.

Preventing first and subsequent heart attacks

On the strength of such results, clinicians are now recommending prophylactic low dose aspirin to prevent a heart attack in patients with a known predisposition to heart disease. One study among 22,000 American doctors⁶ showed that aspirin could reduce the risk of a first heart attack by a startling 44% compared to placebo. Moreover, in patients who have already suffered a heart attack, aspirin has been shown, across a range of trials, to induce large and highly significant reductions in non-fatal heart attack.⁷

Aspirin has also proved exceptionally useful in reducing the risk of death in patients with unstable angina,⁸ and in improving the outcome of vascular surgery, including coronary bypass grafts.⁹

With many new aspirin studies currently underway, we will soon know even more about exactly who can benefit most from daily low dose aspirin treatment.

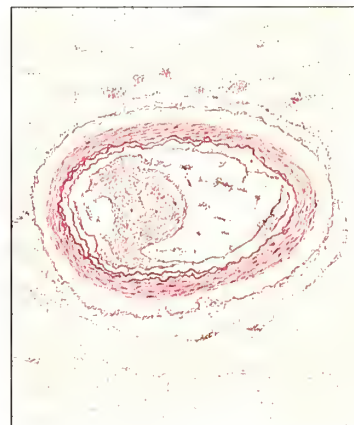
Prevention of stroke

Aspirin's potent anti-platelet effect has been shown to reduce thrombosis of the cerebral arteries (i.e. stroke).¹⁰ Transient ischemic attacks (TIAs) occur when tiny fragments of a building thrombus become lodged in the cerebral vasculature, and these are often precursors to stroke. In a series of randomised studies in which aspirin's anti-platelet action was compared to placebo in 10,000 people with a past

history of stroke or TIAs, a highly significant reduction in the risk of suffering a subsequent vascular event was demonstrated.

The future for aspirin in vascular disease

Aspirin's potential for large scale prevention and treatment of one of the most important causes of morbidity and mortality in the western world – vascular disease – is becoming increasingly clear. Today it is estimated that in the USA, up to 30 million people with previous stroke, heart attack or existing peripheral vascular disease could benefit by taking aspirin on a daily basis.⁷



Cerebral artery thrombosis

That does not take into account the millions with other known risk factors, and those who have yet to present. It is anticipated that in the future even more clinicians will recognise the impact that aspirin can make on peoples' lives, and that more will make use of its potentially life-saving benefits.

References: 1. BMJ 1994; 308: 81-106. 2. BMJ 1994; 308: 159-68. 3. Lancet 1988; ii: 349-60. 4. ISIS 3 Update 1991; 2: 1-7. 5. N Eng J Med 1989; 321(3): 129-35. 6. Circulation 1985; 72(6pt2): V155-60. 7. European Aspirin Foundation.

THE EUROPEAN ASPIRIN FOUNDATION: IMPROVING ASPIRIN AWARENESS

The European Aspirin Foundation aims to increase the knowledge and understanding of aspirin, probably the world's oldest and most widely used medicine.

By stimulating the distribution and exchange of information and discussion on all aspects of aspirin, including current research and old and new therapeutic uses for it, the European Aspirin Foundation helps to co-ordinate current worldwide awareness and increasing medical research interest in this vitally important medicine.

Aspirin is a versatile and trusted home remedy with a long history, that also promises important new applications in medicine.



Find out more about new uses for aspirin

by completing this coupon and returning to the European Aspirin Foundation, PO Box 7, Ripley, Woking, Surrey, GU23 6YU.

Name: _____

Pharmacy address: _____

EUROPEAN
ASPIRIN
FOUNDATION

Perfection on screen

L'Oreal's £3.5 million television campaign for their new cosmetic range Perfection (C&D Oct 30, 1993) begins this week.

Running until the end of April and featuring actress Andie McDowell, the television advertising will be supplemented by a Press campaign in women's magazines. Double page spreads will offer readers a free sachet of Lightnesse foundation to try. **L'Oreal. Tel: 071-937 5454.**



The eyes have it for Guerlain

For Spring this year Guerlain are giving the eyelashes top billing with the introduction of two new mascaras.

Super-cils Beauty Treatment mascara (£13.95) is said to protect and lengthen lashes. Available in five shades, the formulation contains film-forming and moisturising agents to prevent lashes drying out.

Super-cils Waterproof mascara (£13.95, choice of three shades) has thickening and water-resistant properties.

Guerlain have also introduced a waterproof eye make-up remover. It comprises a mixture of mineral oils and waxes.

Coming in a 30ml tube (£13.50), it is said to be effective in small quantities. **Guerlain Ltd. Tel: 081-998 1646.**

Oh Lala for Summer

A new fragrance for Summer from Loris Azzaro is Oh Lala — described as a delicious baroque cocktail of optimism and vitality.

The fragrance is a composition of fruity, floral and fresh notes on a theme of sandalwood, vanilla and spice. More than 70 per cent of the ingredients are natural, says Loris Azzaro.

The range comprises: parfum spray 25ml, £80; eau de parfum spray 50ml, £43; eau de parfum spray (refill) 50ml, £35; EDT spray 50ml, £33; EDT 50ml, £30; and EDT spray 100ml, £46. **PAL Management Services. Tel: 0273 400085.**

Handy offer on Daen

Richards & Appleby are giving consumers and pharmacists a special offer on Daen products.

A vanity case, trial pack of Daen wax strips and M&S gift voucher come free with every display

outer purchased.

Consumers get a free vanity case with every three Daen products they buy from now until October 31. **Richards & Appleby. Tel: 0695 20111.**



Le Jardin down

Le Jardin and its sister fragrance, d'Amour, are set to benefit from a price reduction coming into force in May. The 22ml eau de toilette will then retail at £7.50 and the 30ml at £9.50. **Procter & Gamble. Tel: 0784 434422.**

Folic channel

Cantassium Folic Acid will feature on the Health Channel, a video information service available in selected doctors' surgeries, from April 1. **Larkhall Labs. Tel: 081-874 1130.**

Bennetts' baby

Bennetts Herbal Products range of baby products for psoriasis and eczema will be featured in next month's editions of *Baby* and *Healthcare* magazines. **Bennetts Herbal Products. Tel: 0387 53326.**

Rennie repeats

Roche Consumer Health are repeating last year's Rennie television campaign as part of a £5 million support package for the brand this year. The advertisements will be shown every month this year. **Roche Consumer Health. Tel: 0707 366000.**

Fresh air

Astral's Nice 'n Fresh air fresheners have been given a new look. Available in Original and Floral fragrances, they both retail at £1.95 each. **Secto Ltd. Tel: 0254 261632.**

Lighten up

Crayon Lumiere is a waterproof eye crayon from Mavala. Promising soft colour which glides on and stays put, Crayon Lumiere (£4.90) comes in a choice of ten colours. **Mavala UK. Tel: 0732 459412.**

Holiday makers seek more than the sun

Despite the continued popularity of getting a suntan, half of all holiday makers like to pursue a range of activities while they're away.

In a study carried out for Piz Buin by the Henley Centre, 54 per cent of holiday makers said they wanted more out of their trip than just sunbathing, eating and drinking. However, the tan is still the mark of a good time, and 23 per cent of people are disappointed if they don't return with a good suntan.

Only 9 per cent of consumers believe "no one wants a suntan these days", and 57 per cent admit that, though aware of skin cancer, it won't stop them from sunbathing. A third of people who have difficulty tanning and half of those with sun sensitive skin continue to sunbathe on holiday.

Some 50 per cent of people questioned said they sunbathed on their last holiday, two thirds of them every day. Of these 83 per cent used a sun protection product every time. People are listening to advice on sun damage, with 48 per cent using a higher SPF product than five years ago, with the

average SPF at 8.5. However, the largest proportion of people used SPF4-8.

There is little variation of SPFs in relation to the countries visited. Those in a very hot climate use an average SPF of 9, those in a fairly hot climate SPF8 and an average climate SPF7. Few people use a high SPF while holidaying in Britain.

Women understand more about the harmful effects of sunbathing than men and are likely to use higher SPFs. For 50 per cent of men, using sun lotion is still seen as not macho, so they rarely use one.

Looking to the future, a suntan will no longer be the main purpose of a holiday, says the report, and the proportion of people who say they never use sun protection will decrease. The number of consumers saying they have sun sensitive skin is likely to increase and awareness of premature ageing will grow. The Department of Health and the Met Office are looking into the possibility of including UV intensity details in weather bulletins. **Zyma Healthcare. Tel: 0306 742800.**

Mascara magic from Cover Girl

Ask a woman about her ideal mascara and she'll tell you it should be waterproof, easily removable, and kind to eyes. These were the answers to a survey carried out for Cover Girl. The outcome is Remarkable Mascara.

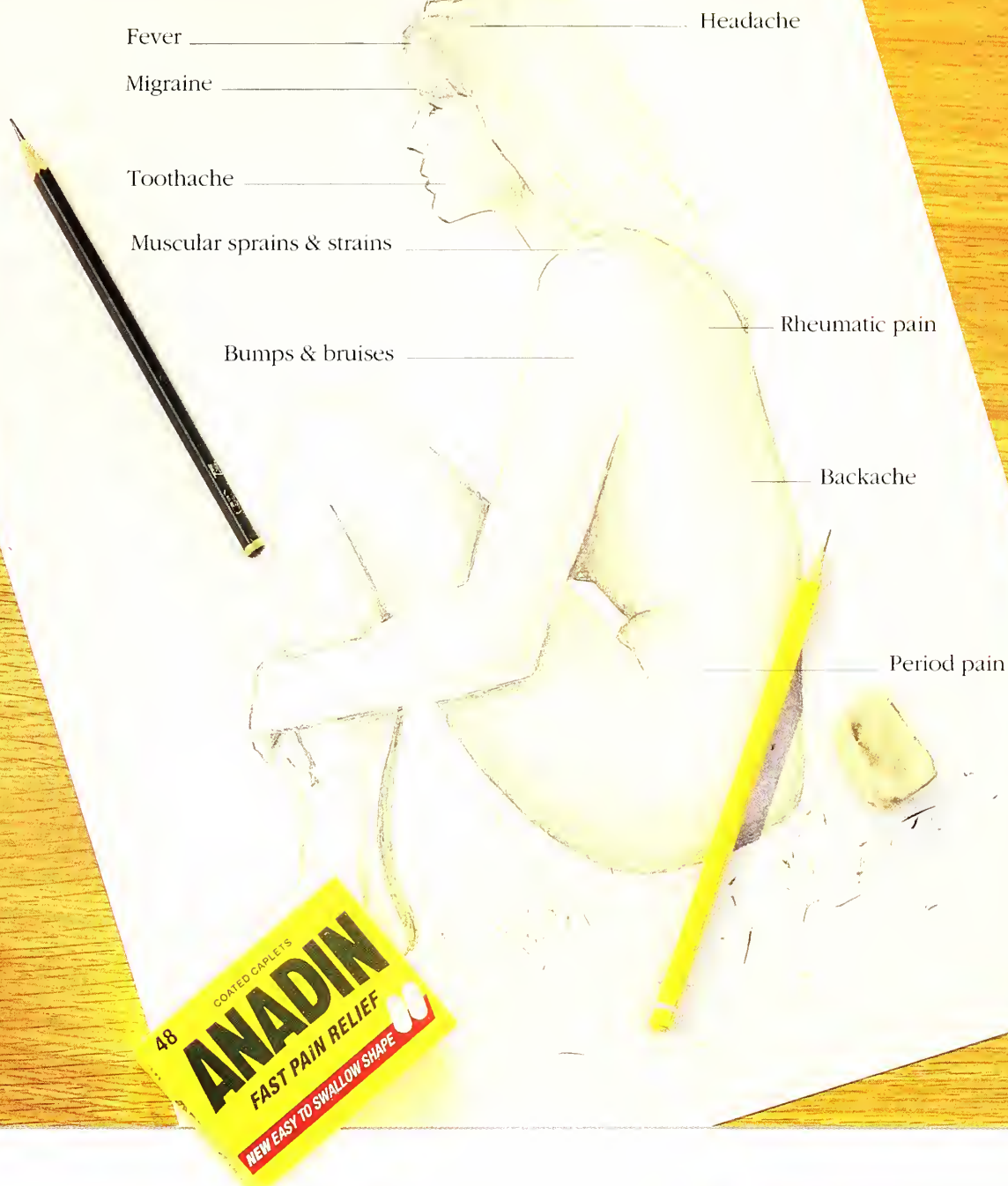
It's waterproof, but can

be removed with an ordinary cleanser. It has a hollow filament brush to separate lashes and will last for hours, says the company. In black, brown/black or navy, it retails at £3.40. For the launch a trial size (£1.79) is available. **Procter & Gamble. Tel: 0202 52414.**



Get your teeth into this promotion from Agfa. From now until the end of August, consumers buying an Agfacolor 24+3 or 36-exposure 100 or 200 ASA film will get a Big Mac voucher which they can redeem at participating McDonalds' restaurants. A full range of point-of-sale material is available. **Jenks Group. Tel: 0494 442446**

AMAZING ANADIN: RECOMMENDED ACROSS THE RANGE OF EVERYDAY PAIN



When you need to recommend for headache and other everyday pains, think of **Anadin**, the UK's leading aspirin brand.

The analgesic, antipyretic and anti-inflammatory actions of **Anadin** give fast and effective relief to indications as diverse

as toothache, period pain, sprains and muscular strains.

Shaped and coated for easier swallowing, **Anadin** offers all your customers tried and trusted pain relief.

So whenever a customer asks for advice on pain, with or without inflammation,

consider recommending the relief of **Anadin**.

TRIED AND TRUSTED

ANADIN*

THE UK'S N°1 BRAND OF ASPIRIN

ANALGESIC ANTIPYRETIC & ANTI-INFLAMMATORY

Product Information: Active Ingredients: Aspirin Ph Eur 325mg/caplet, Caffeine Ph Eur 15mg/caplet. Indications: Symptomatic relief of sprains, strains, rheumatic pains, sciatica, lumbago, fibrositis, muscular aches and pains, joint swelling and stiffness. Relief of headache, migraine, neuralgia, toothache, sore throat, period pains and aches and pains. Contraindications: Peptic ulceration, haemophilia, concurrent anti-coagulant therapy, aspirin hypersensitivity. Dosage Instructions: Adults and the elderly: One to two caplets every four hours to a maximum of twelve caplets in any 24 hours. Children under 12 years: Not to be given unless instructed by a physician. Retail Prices: 4s 40.38, 8s 40.69, 12s 40.94, 24s 41.59, 48s 42.49, 96s 43.49. Product Licence Number: 0165 0060. Legal Category: GSL (packs up to 25 caplets), P (packs over 25 caplets). Product Licence Holder: Whitehall Laboratories, Huntercombe Lane South, Taplow, Maidenhead, Berkshire, SL6 0PH. Date Of Preparation: 22 February 1994. *Trademark.

Colgate PRECISION

A REVOLUTION IN ORAL CARE TECHNOLOGY

Colgate Precision looks completely different - and feels completely different - to every other toothbrush.

But this is no marketing gimmick: years of research and clinical trials have gone into the development of this unique toothbrush which leaves the mouth feeling cleaner and is clinically proven to be most effective at removing plaque.

And our new £3m TV and press advertising campaign should prove equally effective at removing Colgate Precision from your shelves!

So stock Precision from Colgate - The world leaders in oral care.



For further information or merchandising material contact Michael Bealing, Chemist Development Manager, at Colgate-Palmolive 0483 302222.



COLGATE-PALMOLIVE

WORLD LEADERS IN ORAL CARE

1. LONG INNER BRISTLES
CLEAN THOROUGHLY
BETWEEN TEETH

2. SHORT INNER BRISTLES
REMOVE PLAQUE FROM
TOOTH SURFACES

3. LONG, ANGLED OUTER
BRISTLES GENTLY MASSAGE
WHILE THEY REMOVE PLAQUE
AT THE GUM LINE

Colgate

Colgate

PRECISION

THE UNIQUE 3 BRISTLE SYSTEM

SOOTHE AWAY SORE THROATS

SUGAR-FREE

Labosept
pastilles

(Dequalinium Chloride B.P.
250 micrograms per pastille)

Long acting
relief for mouth
and throat infections



Laboratories for Applied Biology Ltd
91 Amhurst Park, London N16 5DR
Telephone 081-800-2252



The ballot box is the answer

In the run-up to the local Council elections perhaps it is time to spell out to candidates from all the political parties exactly what sort of threat to local services is presaged by yet another humiliating pay offer from the Department of Health.

Once again we have been treated with contempt, being offered the lowest award in the health Service (apart from cleaners and laundry workers) when we continue to show one of the highest productivity increases.

Not only that, but we actually work actively to help GPs to save money via prescribing advice and we continue to offer sensible solutions to the Department for further contributions to savings such as repeat dispensing, generic substitution etc.

What fools we are and doesn't the Department know it! I would urge those who care to make it clear to Conservative, Labour and Liberal Democrats that local voting may well reflect pharmacy attitudes to national Health Service policies.

Meanwhile, is it too much to hope that the Council of the Royal Pharmaceutical Society will condemn this gradual destruction of a superb service instead of maintaining a theoretical, sagacious detachment? It is time we ensured that all Council members are practitioners in the real world of hospital and community pharmacy before we have no profession for them to represent.

Peter Curyhey
le of Man

Oh well done, PSNC!

Are we now expected to congratulate the Scottish Pharmaceutical General Council in the current round of negotiations?

Having already signed away the right of every pharmacist to independently practise their chosen profession (as they did not so long ago) with the odorous "new contract" they are now about to achieve the probable closure of any business spending less than 1,000 ppts per month.

Most people expect to have to contend with a vast array of problems in business, but these are not normally put forward by their own negotiators! One wonders what next year's step will be — no allowance for those doing less than 2,000 ppts per month perhaps? That would see off a few more of us,

and so on each year until nothing is viable save a few large pharmacies.

I have no axe to grind as my own business handles a good many scripts in excess of these figures, but my sympathies go to my colleagues who will be so badly hit — even bankrupted in some cases.

The Government's supposed desire to have readily accessible health care and advice in every high street must now itself be under threat, although I'm sure they will take comfort when they start counting how many parcels of £21,000 they will save in the coming years.

Ann Walker
Bridge of Weir, Renfrewshire

Don't be mean with PORs

The latest medicines to switch from POM to P are generally welcomed by both professions and public. Most companies have recognised the service and extra time pharmacists have to provide to the patient when one of these new medicines are sold, by maintaining a reasonable profit on return. Today with the launch of Tagamet 100, Beecham seem to have failed the pharmacist. They think a POR of 23.5 per cent is reasonable. I think not. It is time that pharmacists make it clear to the companies that offer this level of return that we are not prepared to stock or promote their products. Pepcid AC is welcomed; Tagamet 100 stay away.

V. Patel
Tadworth

Time for NPA and PSNC to part company

Now that pharmacy contractors have voted overwhelmingly for radical change within the PSNC this must surely be the time for total elimination of the NPA representation thereon.

Times are changing, and I am sure that the NPA Board will be men enough to realise this and act accordingly, and quickly. Community pharmacy will be eternally grateful for the evolution of the PSNC from a mere subcommittee of the then National Pharmaceutical Union to its present day self-standing body.

The NPA's real power must now not be centrally on the PSNC, but locally at its grass roots level through its 21 areas, in negotiating the 20 per cent of FHSA monies. Splitting and

diluting their efforts can only be to the detriment of the individual NPA members.

The five NPA nominees must now unite and work wholeheartedly with the PSNC to reform and reduce it to a more workable and effective committee.

C.O. Jones
Compton, Staffs

No evidence of abuse of urgent call-out

I was interested to read a report "How urgent is urgent" (*Pharmacy Update* March 5, pii) by Andrew Burr. However, I do not agree with his conclusions which appear to be based on partial presentation of the facts. The following aspects need to be clarified:

- Within the 18 month period specified 1,066 urgent prescriptions were written by GPs at a cost of £15,000 in pharmacist call-out fees alone. On a weekly basis this is 15 urgent prescriptions and call out fees of £208. However, how many patients are registered with the 107 GP practices? For example, 15 urgent prescriptions among 200,000 patients does not appear high.
- Networks sometimes exist between GPs, pharmacists and

dentists, often in the public interest. These can serve to exchange information on matters such as cost-effective prescribing and out of hours services.

Could it be that in the area of Cynon and the Lower Rhymney Valley the patients are getting a better emergency service than other areas which may be under-developed in this respect? It is even possible that as a group they may well have a lower admission rate to hospital casualty departments due to better urgent pharmaceutical care.

- Some items on the "bizarre" list like codeine linctus, Anthisan cream and Difflam oral rinse may well be urgent, given certain circumstances. However, it is not clear if these items were solely prescribed or whether they were secondary to a main item. Nevertheless we must focus on the fact that out of 1,066 urgent prescriptions, upwards of 1,000 prescriptions may well be non-bizarre.

While I accept that a definition of an urgent prescription is justified, there is simply not the evidence in Andrew Burr's report to conclude any misuse of GPs' judgment in deciding what is urgent or any wastage of valuable resources.

I. Patel
London SW17



Salim Patel of W. Marchant Pharmacy, Gloucester, is all set for a relaxing weekend at a country club hotel, courtesy of Intercare. Mr Patel (right), one of the winners in the recent Tixylix window display competition, is seen receiving his prize from his Intercare representative John Merchant

TAGAMET* 100

cimetidine

NOW THE WORLD'S FIRST H₂-ANTAGONIST GOES OTC,

SmithKline Beecham Consumer Healthcare is delighted to announce that cimetidine, the active ingredient in Tagamet, has been granted a Pharmacy licence.

Tagamet was the first H₂-receptor antagonist and is one of the world's most widely prescribed medicines. Tagamet 100 will be indicated for the short-term symptomatic relief of heartburn, dyspepsia and hyperacidity, as well as for the prophylactic management of nocturnal heartburn. Your local SmithKline Beecham Consumer Healthcare representative will be calling soon with further details. This will enable you to gain maximum benefit from one of the most important POM to P switches the healthcare profession has ever seen.

A 4-part Pharmacy Reference and Training Manual and point-of-sale material has been produced by SmithKline Beecham Consumer Healthcare to ensure that you and your assistants are well equipped to handle this important therapeutic breakthrough in the pharmacy.

Make sure that you don't miss Parts 1 and 2 of this detailed training programme which will be arriving in your pharmacy soon.



Product Information: **Presentation:** White elliptical film coated Tiltab tablet containing 100 mg cimetidine. **Dosage and administration:** Adults (incl. the elderly), children 16 years and over: Relief of heartburn, dyspepsia, hyperacidity: Two tablets with water when symptoms appear. If symptoms persist for more than 1 hour after the first dose, a second dose may be taken, but no more than 4 tablets in any 4 hours and no more than 8 tablets in any 24 hours. Prophylactic management of nocturnal heartburn: One tablet with water one hour before bed time. In all cases, not to be taken for more than two weeks. If symptoms persist for more than two weeks or recur frequently, a doctor should be consulted. Not to be given to children under 16 years of age. **Use:** Short term symptomatic relief of heartburn, dyspepsia, hyperacidity. Prophylactic management of nocturnal heartburn. **Contra-indications:** Hypersensitivity to cimetidine or any of the excipients. **Precautions:** Not recommended in patients: with impaired renal function; hepatic impairment; taking oral anticoagulants, phenytoin, theophylline, intravenous lignocaine; middle aged or older patients with new/changing dyspeptic symptoms; any patients with unintended weight loss and dyspeptic symptoms, because of potential delay in diagnosis of gastric cancer; with a history of peptic ulcer.

ECLIPSING ALL OTHER PRODUCTS FOR HEARTBURN, EXCESS ACIDITY AND DYSPEPSIA



AIDS, esp. elderly; with compromised bone marrow; in pregnancy and lactation; with any other illness, using any medication, under medical supervision for other
s. **Adverse reactions:** Diarrhoea, dizziness, rash, tiredness. Gynaecomastia, occasional liver damage, confusional states (usually in the elderly or very ill), all reversible.
thrombocytopenia, leucopenia, agranulocytosis, all reversible. Very rarely, interstitial nephritis, acute pancreatitis, headache, myalgia, arthralgia, fever, sinus brady-
tachycardia and heart block, all reversible, aplastic anaemia, pancytopenia and anaphylaxis. Reports of alopecia and very
reports of reversible impotence but no causal relationship has been established at usual prescribed therapeutic doses.
at licence number: 0002/0230. **Retail Price:** Tablet (12's) £2.29, (24's) £3.99. **Legal category:** P. **Date of preparation:** 9
1994. 'Tagamet' and 'Tiltab' are trademarks. SmithKline Beecham Consumer Healthcare, SB House, Brentford, Middlesex
BD. Telephone number: 081-560 5151.

SB SmithKline Beecham
Consumer Healthcare

*Tagamet is a registered trademark of
Smith Kline & French Laboratories Limited

A radical approach needed for the front shop

This Midlands pharmacy is next to a GP surgery and serves a largely elderly population, so why do babycare and toiletries take up so much shelf space? Business consultant John Kerry investigates how Mr J can concentrate on the ethical side of his business

When Britain was a great manufacturing power and the Midlands were known as the "workshop of the world", there was a thriving community where Mr J has his new pharmacy. Then it was two-up-two-down, back-to-back terraced housing and dozens of small industrial units. At its heart a bustling high street, with every shop including the village chemist.

It was not pretty and was quite an unhealthy place to live, just like hundreds of other industrial communities that sprouted up in the nineteenth century.

Changing face

This one, like most of the rest, has changed. The inefficient and dirty factories have gone and the buildings pulled down. Most of the housing has been demolished and the high street simply does not exist any more, apart from a pair of Victorian pubs which seem to survive any recession. The families also departed; there was nothing left for them.

In recent decades the developers have moved into the area. Modern housing and nicely landscaped estates have risen from the remains of the industrial wasteland. A new

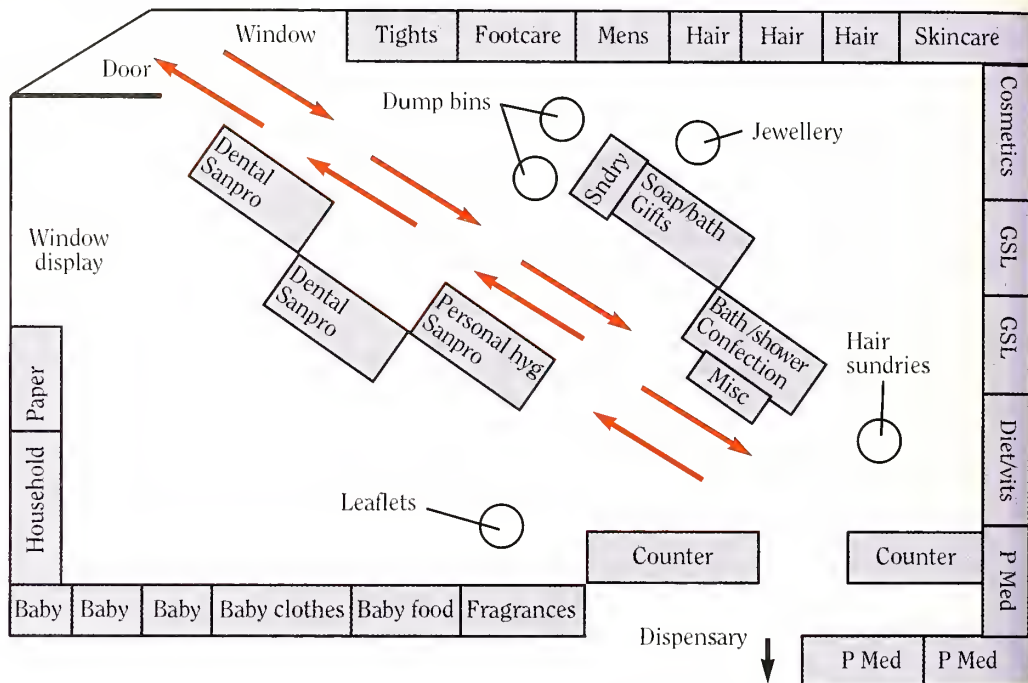
Shelf fitments or gondola sections

Babycare	2
Baby clothes	1
Baby food	2
Fragrances	1
Sundries	1
P medicines	2
GSL medicines	2
Diet/vitamins	1
Cosmetics/skin	2
Haircare	3
Men's	1
Dressings	1
Sanpro	2
Personal hygiene	1
Dental	1
Paper/cotton	1
Household	1
Gifts	1/2
Confectionery	1/2
Soap/bath	1
Total	27

population with a high percentage of senior citizens has chosen to live here.

Unfortunately the developers did not plan for all the demands of the new population: no shopping precinct, no surgery and, of course, no pharmacy.

An enterprising GP partnership built their own



Mr J's current layout: better than adequate, but after three years sales remain poor

surgery some five years ago and it is now well established. Naturally the residents, most of them retired, wanted their own pharmacy and went about getting what they wanted in an organised way: with a 3,500 signature petition and the local MP and Mr J, who was working in the local hospital pharmacy, backing the project. Mr J built his pharmacy next to the surgery, right on the main road, with plenty of free car parking behind.

Public pressure for pharmacy

This kind of public pressure for a pharmacy is not a prescription for success, as many have found to their cost, but inside three years Mr J has built up a good turnover, topping £325,000. Prescription items are touching 3,400 in a good month and the trend is upwards. Counter sales, at £80,000, contribute 25 per cent of the gross turnover and Mr J has calculated that 70 per cent (£56,000) of this is from P and GSL sales.

What is clear is that the local community wanted a pharmacy and is using the service well. There is some doubt about their need for a "chemist" shop. Although on the site of the old high street, this is not a shopping precinct by any stretch of the imagination. The local population might use the few locals for convenience, but like

most Britons, pop to one of the two nearby towns for their weekly shop.

Despite having a well-fitted, roomy, bright front shop, it is used like the local grocer for forgotten or top-up shopping. The shelves, well stocked with toiletries, haircare products, baby goods and much more, are putting less than £500 a week in the till — certainly not enough, particularly bearing in mind the absence of local competition.

Mr J has two prime goals: to reward the local community with the best pharmacy service he can provide and to build on the good start he has already made. He has some good options on the pharmacy and medicines services side and some difficult decisions to make with the counter.

It is clear the local community values the pharmacy for its

dispensing service and counter medicines. These two categories account for £300,000, equivalent to 90 per cent of Mr J's turnover. This vital part of the business is set fair for natural growth over the next two years and with a little stimulus should reach £500,000 by 1996.

Ethical hints

1. Regular six-month distribution of practice leaflets, updated to include any new services. Mr J has used these to good effect.
2. Expand prescription collection and delivery service to include other essentials, eg "inco", OTC medicines, toiletries etc.
3. Increase shelf and display space given to GSL and P medicines, currently under 20 per cent. This will need an adjustment of the medicines counter position, giving more secure space for P medicines.
4. Introduce healthcare product ranges suitable for the mainly retired population, eg aids for the handicapped, diabetic foods and drinks, herbal and homeopathic remedies, and incontinence products. Each of these deserves a metre of shelving and should be given a minimum trial of 12 months.
5. Communicate with all GP surgeries, nursing and residential homes, sheltered housing etc, with details of new services and products.

Stands and merchandisers

Healthcare leaflets	1
Hair sundry	1
Other sundry	1
Bathroom sundry	1
Jewellery	1
Dump bins	2
Footcare	1
Tights	1
Wholesaler promotions	1
Others	2
Total	12

Continued on p524

STERADENT'S SPARKLING SALES STORY. (WHAT A MOUTHFUL.)



Steradent (with the help of some amusing little TV teeth) is really putting some bite into the growing denture care market.

It's already the leading brand in the cleaner market, with a 52% share that's rising. It's even making considerable inroads into the younger partial denture wearer market.

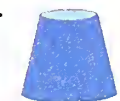
This year we're rolling out nationally the highly successful 'Happy Teeth' campaign at a cost of £1million - Steradent's highest spend for years.

And we're introducing three new Steradent products - Fresh, a cleaner

with mouthwash ingredients; Extra Strength, a relaunch of the Deep Clean anti-tartar formula; and new Fixative Cream with a longer-lasting hold and camomile to help soothe sore gums.

So give Steradent extra space.

And get your teeth into extra profit.



Radical changes to the front shop

A radical re-think is required because a substantial part of the shop area is being largely ignored. The pharmacy is open six full days and three hours every Sunday. It is well stocked, with plenty of choice at competitive prices.

Layout and merchandising is better than adequate, but after three years of trading, sales are poor. Sales of all other products amount to a mere £75 a day. Simply re-designing the shop layout, having some deep-cut promotions and distributing flyers will not remedy this situation.

Mr J could spend thousands, cut his margins and open all hours, but will it substantially increase his turnover of toiletries, baby care and paper? Probably not. So what is he to do with all of this space?

There are six shelving fitments for medicines and dressings, plus a wire leaflet dispenser. The rest, 22 fitments and 11 merchandisers, put £75 a day into the till. On average,

Front shop recommendations

Adjust the space allocated to each category as follows:

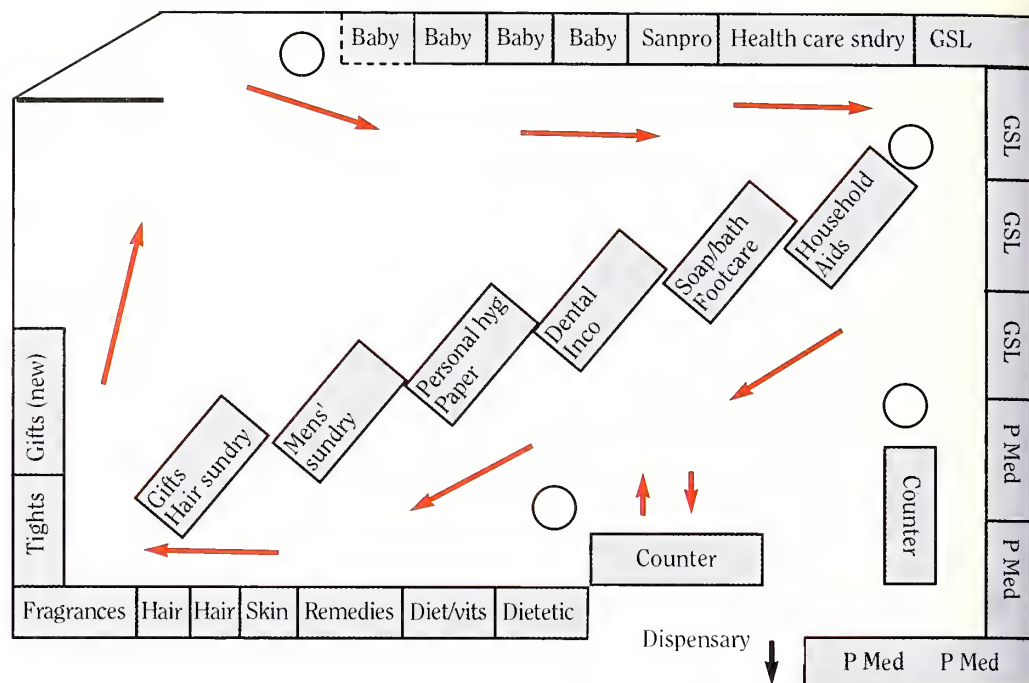
Baby care	minus 1 = 1
Baby clothes	minus 1 = 0
Baby food	minus 1 = 1
Cosmetics/skin	minus 1 = 1
Hair care	minus 2 = 1
Men's	minus 1/2 = 1/2
Dressings	no change = 1
Sanpro	minus 1 = 1
Pers hygiene	minus 1/2 = 1/2
Dental	minus 1/2 = 1/2
Paper/cotton	minus 1/2 = 1/2
Household	minus 1/2 = 1/2
Soap/bath	minus 1/2 = 1/2
Fragrances	minus 1/2 = 1/2
Sundries	minus 1/2 = 1/2
Diet/vits	no change = 1
P medicines	plus 2 = 4
GSL medicines	plus 2 = 4
Gifts	no change = 1/2
Confectionery	no change = 1/2
Net change	(-7) 20

£2.50 per metre of shelving. That is about as bad as it gets.

The 12 associated merchandisers and stands have all been added since the shop opened three years ago. In a smaller shop, they would not only spoil the look of the place but also be a hazard to customers. Here they merely add to the clutter. Some, perhaps half of them, need to go.

At the top of the hit list, Mr J's wholesaler promotional merchandiser, a recently introduced and ill-conceived idea that has not only failed to move product, but cost Mr J money because he had to commit to unnecessarily large volumes of promoted items.

Overstocks of often minor brands now clog up his small stock-room. The only comfort to Mr J is that he was not alone



A proposed new layout: an extra gondola fitment has been added, but the effective stagger formation retained. The counter has been moved and most of the merchandisers either taken out or incorporated into vacant wall fitments

in mistakenly believing this scheme would work. Hundreds of others did, too.

Seven one-metre shelving fitments have been emptied and half a dozen stands have gone in this shake-up. A re-arrangement of the gondolas (see plan) will improve traffic flow and the sections have not only shrunk, but have been combined in a more logical layout.

Empty units

This still leaves seven empty units. Four can accommodate the new healthcare ranges, aids for the handicapped, diabetic, remedies and inco, and one of the remaining three for a good range of baby toys — not sundries. Senior citizens are more often than not grandparents, too, and much more likely to buy a £5 rattle for their little grandchild than a pack of disposable nappies.

Another unit could carry "Gifts under a tenner", those high-profit, impulse buys such as fashion accessories, toilet bags, hair ornaments etc. The third vacant unit could be for hanging sundries from one of the sacrificed stands.

This is the kind of shop that everybody in the immediate area will patronise. Its main reason for being there is community healthcare and it should trade heavily on this and its ideal position next to the health centre.

Traditional fare

As a retail outlet for traditional chemist lines — toiletries, haircare, baby care and so on — it has failed. This is not surprising because a large number of well-established retail pharmacies are fighting a losing battle to hang on to these markets, too.

It is a good sized shop and one that most would find a pleasurable place to visit. By concentrating on and specialising in medicines and

other healthcare lines, turnover should climb nicely. Because it is also easily accessible and visible, with free parking, no doubt it will earn a reputation amongst

the citizens of the two nearby towns, who may abandon their own pharmacy for one that has good ranges of specialist healthcare products.

Sole trader: independent

Purpose-built: detached main road position

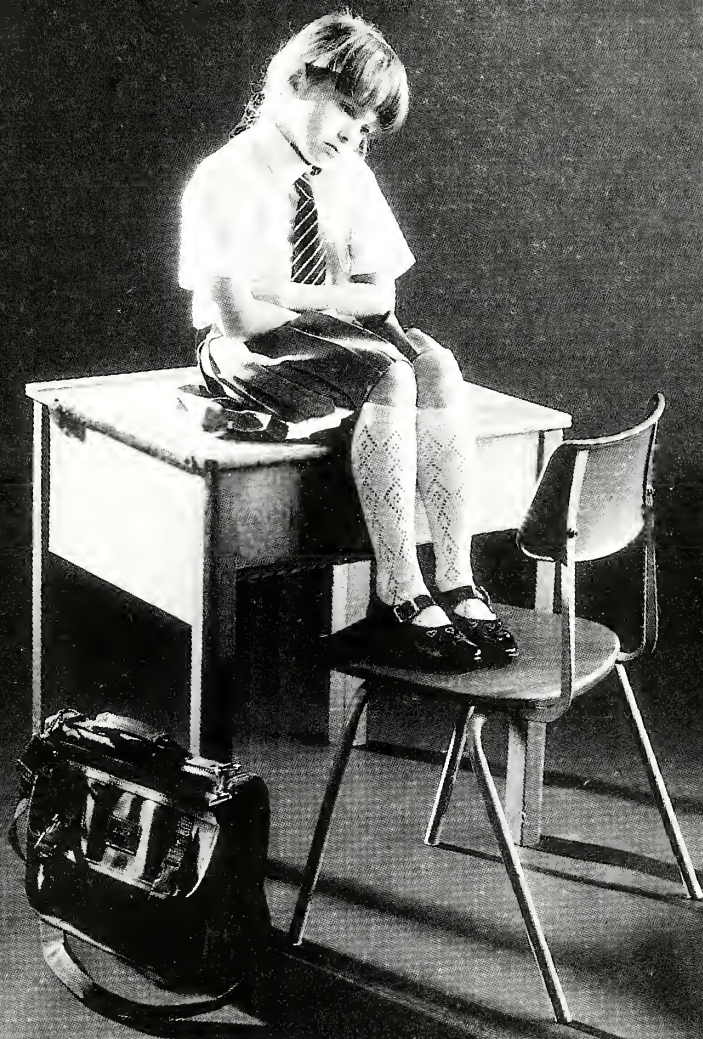
One GP practice: next door, three GPs

Competitors: none in village, but eight pharmacies in two neighbouring towns, each more than a mile away

Financial year ending November 1992

	1991	
	£	£
Sales: takings	63,100	44,800
NHS levy and script income	11,100	9,500
FHSA fees	210,100	171,000
	284,300	225,300
Stock at November 30, 1991	32,000	
Purchases	200,000	181,000
Packaging materials	300	
	232,300	181,000
Stock at November 30, 1992	37,500	32,000
	194,800	149,000
Gross profit 31.5 per cent (1991 33.9 per cent)	89,500	76,300
Overheads		
Consultancy fees	16,600	16,800
Wages and national insurance	14,000	12,800
Rates, heat and light	2,700	2,500
General insurances	1,000	500
Repairs and renewals	200	400
Equipment hire	1,100	1,200
Motor and travelling expenses	2,900	2,100
Printing, stationery, advertising	500	2,100
Telephone and postage	500	800
Cleaning, laundry, staff welfare	30	200
Accountancy charges	1,200	600
Legal and professional charges	400	800
Subscriptions	700	700
Bank interest and charges	4,700	2,100
Loan interest	8,300	13,000
Miscellaneous expenses	500	500
Use of home as office	300	300
Depreciation	5,000	5,500
	60,630	62,900
Net trading profit		
10.5 per cent (1991 6 per cent)	28,870	13,400

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CARYLDERM

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REVISED PRESCRIBING INFORMATION CARYLDERM® Lotion, FULL MARKS® Lotion and PRIODERM® Lotion Indications: CARYLDERM Lotion, FULL MARKS Lotion and PRIODERM Lotion: Treatment of head lice infestation. **Active ingredients:** CARYLDERM Lotion: carbaryl 0.5% w/v. PRIODERM Lotion: malathion 0.5% w/v. FULL MARKS Lotion: phenothrin 0.2% w/v. **Dose and administration:** Sprinkle onto dry hair and rub gently into the scalp until all the hair and scalp are thoroughly moistened. Allow the hair to dry naturally and leave for at least 2 hours. Shampoo hair as normal. Rinse and comb whilst wet to remove dead lice and eggs. **Contra-indications, warnings, etc:** Not to be used on infants under 6 months of age except on medical advice. Avoid contact with the eyes. Skin irritation can occur. These treatments may affect permed, coloured or bleached hair. Do not use these products if you are sensitive to any of the active ingredients. CARYLDERM Lotion, FULL MARKS Lotion and PRIODERM Lotion contain isopropyl alcohol which may exacerbate asthma or eczema. As they are also flammable, apply and dry the hair with care and do not use artificial heat. **As:** CARYLDERM Lotion, FULL MARKS Lotion and PRIODERM Lotion: 55 ml, £1.595 (R) £2.80; 160 ml: £2.845 (R) £4.99. **Product licence numbers:** CARYLDERM Lotion PL 0337/0038, FULL MARKS Lotion PL 0337/0153, PRIODERM Lotion PL 0199/5002R. **Product licence holders:** Napp Laboratories Ltd., Cambridge Science Park, Milton Road, Cambridge CB4 4GW. UK. (CARYLDERM Lotion, FULL MARKS Lotion). Priory Laboratories Ltd., (Member of Napp Pharmaceutical Group), Cambridge Science Park, Milton Road, Cambridge CB4 4GW. UK. (PRIODERM Lotion only). **Date of Preparation:** December, 1993.

Further information is available on request from: Napp Consumer Products Division, Napp Laboratories Limited, Cambridge Science Park, Milton Road, Cambridge. CB4 4GW. The NAPP device, FULL MARKS, PRIODERM and CARYLDERM are Registered Trade Marks. © Napp Laboratories Limited, 1993. Date of preparation: December, 1993.



Unichem boost sales 12.3 pc

Unichem have announced a sales increase of 12.3 per cent to almost £1.18 billion for 1993, with pre-tax profits of £37.5 million up 27.5 per cent.

The wholesale like-for-like growth remained the largest element although the acquisition of Bradford Chemist Alliance and distribution in Scotland for John Hamilton customers has played a significant part (20 new accounts in Scotland have come from the John Hamilton-Numark link-up).

Wholesale turnover grew 10 per cent to £1.14bn, £67.4m from coming from Unichem's Portuguese operation. Growth was 1 per cent ahead of the wholesale sector generally.

Managing director Jeff Harris says future sales growth will rely

on further like-for-like increases as there are few opportunities left for growth by acquisition of regional wholesalers (only 18 remain across the country).

Wholesale turnover growth in 1993 came strongly from medicines, with manufacturers switching from direct supply, and the growing hospital distribution sector. Expansion of the own label range is expected to generate further sales. Some 7 per cent of wholesale turnover was from sales to Unichem's own retail outlets.

Wholesale operating profits grew to £32m making a year on year increase of 12.4 per cent. This was thanks largely to efficiency programmes including an automated ordering system

which will be expanded by the end of the year.

The retail contribution to group turnover grew despite margin pressures. Retail sales increased to £114m from £79.7m. There are currently 280 retail outlets, 55 being added last year. These include four superstore concessions.

Retail businesses are to be given an extra push with upgraded planograms and other merchandising information being distributed to retailers. A retail advisory board is to be set up.

While Unichem saw toiletry sales remaining static or falling, there was real volume growth in OTC medicines. Together they accounted for over 2 per cent growth.

Illegal drug importer fined £7,000

An unlicensed drugs importer has been fined £7,000 and ordered to pay £5,000 costs after importing drugs from India and Mexico, then selling them to pharmacies in London and Kent.

Pierre Schaffer, of Cliftonville, was arrested in October 1993 after Astra Pharmaceuticals heard that a Frenchman called Pierre was selling drugs at a 40 per cent discount. They engaged a private detective to investigate.

Medicines recovered from Mr Schaffer's premises included two boxes containing omeprazole but labelled as diazepam.

He later admitted offences including wholesale dealing without a licence; importing and selling medicines without a product licence; mislabelling medicines; and possessing medicines for unlawful supply.

Mr Schaffer's wholesaler dealer's licence was revoked in 1986 because of irregularities, but restarted in 1992. He never re-applied for a licence.

Friends delivered drugs from Mexico and Bombay. Mr Schaffer also made trips. The 14 transactions together involved £123,226-worth of drugs.

Sick pay changes

From April, employers paying £20,000 or less in National Insurance contributions a year will be able to claim back 100 per cent of Statutory Sick Pay after four weeks of absence and not 80 per cent as stated (C&D March 12, p438).

Parallel imports

Parallel importers Primecrown have to wait for an April hearing to find out if they can import Ditropan tablets. The hearing was first set for March (C&D February 12, p266).

Torbet Laboratories

Torbet will market Moorland indigestion tablets and Anethaine cream for Seton Healthcare and Junior KAO-C from Cupal. Dental Health Products, which operate out of the same offices as Torbet, have bought Dentogen clove oil gel and liquid, also from Cupal. They are available from distributors Farillon.

Tax guide

The latest version of C&D's pocket tax guide is included with this week's issue and outlines changes resulting from the Finance Bill.

Sandoz over Easter

Sandoz Pharmaceuticals in Leeds will close over Easter from April 1-5 inclusive to install a new computer system.

Patent lodged

Geneva Pharmaceuticals, a US generics company owned by Ciba-Geigy, has filed an Abbreviated New Drug Application there for the Form 1 version of ranitidine hydrochloride. Glaxo holds the Form 2 patent in the US until 2002.

PAGB launches new OTC Code

The new Code of Standards for the Advertising of OTC Medicines, launched by the Proprietary Association of Great Britain to commemorate its 75th anniversary, has been blessed by the Advertising Standards Authority chairman Sir Timothy Raison.

"Of course there is a need for statute in this field; the statutory and the self-regulatory complement each other to very good effect," Sir Timothy told guests at a reception to launch both the new Code and the PAGB's anniversary year last week.

The principle changes to the Code are a ban on the use of celebrities for product recommendations and a requirement

for all advertisements to feature "Always read the label" and the name of the active ingredient if the product contains only one.

The changes were in response to the 1992 European Pharmaceutical Advertising Directive, and were the only ones required.

Sir Timothy noted that a code "constructed and approved" by industry was more likely to gain industry commitment than one imposed by legislators.

He added: "The PAGB is very effective... Indeed the occasions at ASA when we have felt the need to intervene in advertisements which have been through the PAGB's scrutiny are all but non-existent."



Colston Herbert, PAGB president, and executive director Sheila Kelly pictured with a copy of the new Code of Standards for Advertising OTC Medicines and a scrap book of consumer advertisements from yesteryear, including some for Beechams Pills

AAH to shed building firm

AAH are on the verge of disposing of the last of their non-core businesses — AAH Builders Supplies — to concentrate on their healthcare, distribution and environmental services.

They have already sold part of the subsidiary, AAH Builders Merchants, to Travis Perkins for £41.8 million and are negotiating to sell Yorkshire Brick Company.

Builders Merchants' reported operating profits of £2.1m in the year to March 31, 1993, down slightly on the previous year.

Novo deal

Novo Nordisk, Danish makers of insulin and human growth hormone, have signed an R&D deal with a small Swedish biotechnology company.

The initial agreement with Karo Bio is for osteoporosis drug research and lasts for three years. But there is an option to extend the collaboration.

Cortecs float to raise £15m

Cortecs plan to pay for their growing R&D bill with a flotation in the London Stock Exchange.

The company hopes to raise £15 million for research into drug delivery systems.

Although the share price had not been set at the time C&D went to Press, it will be at least 50p, says Cortecs' sponsor Henry Cooke Corporate Finance.

The company has been quoted on the Australian Stock Exchange since 1986 and in New York since 1993. In the year to June 30, 1993, Cortecs spent £4.3m on R&D compared to £3.3m the year before.

Among products in development are Oncholab, an anti-cancer targeting system; a system for the oral delivery of peptide drugs such as calcitonin; a rapid non-invasive test kit for *H. pylori*; a delivery system to avoid first pass metabolism in the liver; and a dephat, for the prevention of diarrhoea.

Cortecs also manufacture and market ethical and over-the-counter products, as well as diagnostic kits.

A Pathfinder prospectus for the UK flotation was due to be issued just as C&D went to Press.

Discpharm challenge PPA on drug pricing

There is an anomaly in the way the Prescription Pricing Authority reimburses some parallel imported and UK drugs, according to Discpharm of Staines.

The parallel import company has just been granted leave for a High Court judicial review to look into the issue of pack sizes and reimbursement levels.

Some of the drugs they handle are specially packed because they are effervescent, sterile or absorb water from air. They cannot, therefore, be split without ruining the contents. So, the whole unit has to be dispensed to patients.

But the PPA has set the reimbursement for the imported drugs at the same rate as the nearest UK pack size rather than for the amount of drugs actually dispensed in the PI pack.

Discpharm say the practice is "disproportionate and discriminatory" and puts many drugs imported from other EC countries at an immediate price disadvantage.

As such, the company says the policy contravenes EC free-trade laws and amounted to "an unfair restriction on trade".

Discpharm say they have

contacted the PPA directly and through their local MP to have the policy abandoned. The PPA responded in April last year saying that only the Department of Health could change the reimbursement policy.

At the time C&D went to Press, the Department had not responded, says the company.

Wider aroma

Sutherland Health have bought the Mere & Willow range of five pre-blended aromatherapy oils and aim to take them to a wider pharmacy audience. Manufacturing will be contracted out.

The range was previously available through beauty salons and selected pharmacies within the M25 area. But the acquisition means a wider audience.

The oils are now available via Sutherland reps but will be stocked through wholesalers in the future.

Coming Events

Chiltern conference

"Health gain — the pharmacist's contribution" is the theme for the Chiltern Region conference on Sunday, June 12, at the Postgraduate Medical Centre, Edgware General Hospital. It starts at 10am and closes at 4pm. Speakers include Prof Peter Noyce (University of Manchester), Jeanette Howe (DoH), Gopa Mitra (PAGB), Charles Butler (Berkshire PHSA pharmacist member) and Dr Peter Wilson (NW Thames RHA).

The fee is £15. Applications by June 1 to Mrs C. Ashmore, 94 Sedgemoor Road, Flackwell Heath, nr High Wycombe, Bucks HP10 6AP.

Monday, March 28

Derby & District Branch, RPSGB, at the Postgraduate Medical Centre, Derbyshire Royal Infirmary, London Road, Derby, 7.30 for 8pm. "Drug and Non-Drug treatments of depression". The speaker will be a principal psychologist from Kingsway Hospital.

Wednesday, March 30

Sheffield & District Branch, RPSGB, at The Jessop Hospital for Women, 7.30 for 8pm. "Am I mad to do what I do?" Speaker: Mr D N Sharpe, chairman PSNC.

Somerset Branch, RPSGB, at the Musgrove Park Hospital, Postgraduate Medical Centre, Taunton, 7.15 for 8.15pm. "The importance of Lamberts special food supplements". Speaker: Sue Lamming, Technical Marketing Assistant.

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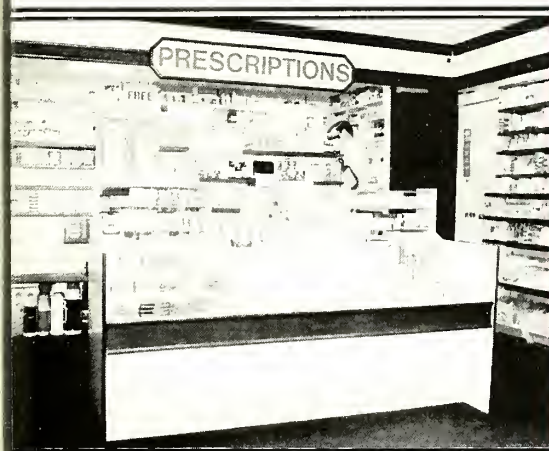
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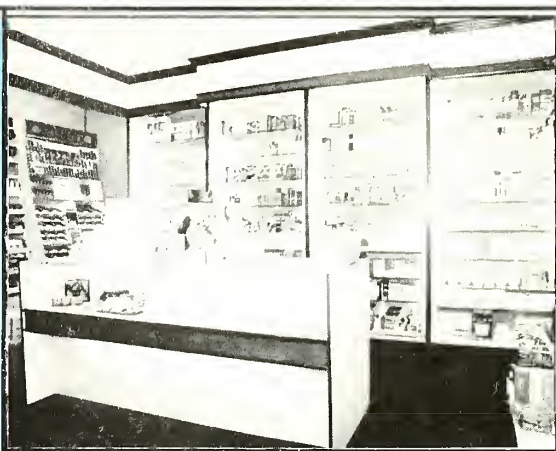
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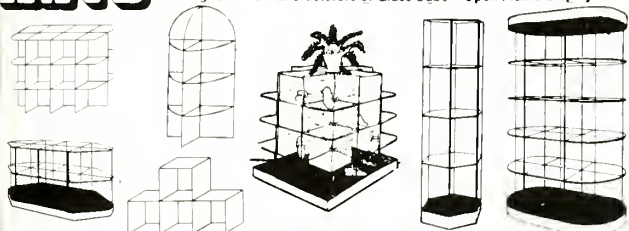
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EDGWARE ROAD - Pharmacist required to work for 3 days a week, hours 10am-7pm, newly registered considered. Tel: 071-723 5424.

GRAYS, ESSEX - Regular Saturday locum required 9am-1pm, small independent pharmacy. Tel: 0375 372821.

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HORNCHURCH, ESSEX - Qualified dispensing assistant required full or part time. Tel: 0708 747495.

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TRADE LESS 30%+VAT+POSTAGE - Genisol liquid 250lx2 (exp 5/94), 2x20l Xyllocaine Adrenaline (exp 6/94), 28 Suscard buccal 5g (exp 6/94), 150l Caneal con (exp 7/94). Tel: 0322 526470.

TRADE LESS 50%+VAT+POSTAGE - 40 Anafranil SR 75mg (exp 4/94), 42 Co-Betaloc, 120 Intal solo 2ml, 28 Kalten tabs, 101 Midrid caps, 2 Rinatec sprays. Tel: 0733 578277.

TRADE LESS 25%+VAT+POSTAGE - 3x180 Titalac (exp 4/98), 100 Pyrogastrone (exp 3/96), 50 Ossopan 800 (exp 6/96), 56 Trifyba (exp 3/95), Ponstan disp, 20 Sorbsan 10x10, 30 Sorbsan 5x5, Trico-tex 1x50, 500 Navidrex K, 2x40g Metrogel plus others. Tel: 0858 467027.

TRADE LESS 33%+VAT+POSTAGE - 39x20 Algitec (exp 8/94 & 6/95), 5 Teoptic 2% (exp 2/95), 4x30 Transiderm Nitro 10 (exp 1/95), plus others. Tel: 0684 575686.

TRADE LESS 35%+VAT+POSTAGE -

220 Aldactone 50mg (exp 95), 260 Aldactone 25mg (exp 95), 73 Aldactide (exp 96), 112 Becodisks 100mcg (exp 11/94), Intal compound (3/94), Pulmicort LS (4/94). Tel: 081-539 1922.

TRADE LESS 50% - Gastrozepin, Tamofen 20mg tabs. Tel: 0582 21760.

HALF PRICE+VAT+POSTAGE - 2 Synarel neb (exp 9/94), 300 Orimeten 250mg (exp 6/96). Tel: 0535 272173.

TRADE LESS 30%+VAT+POSTAGE - 3x20 Pulmicort respules 0.25, 6x30 Megace 160mg, 3x30 Provera 200mg, 2x28 Gatromax, 2x28 Tenif, 6x28 Norval 30mg. Tel: 0236 722523.

TRADE LESS 50%+VAT+POSTAGE - 56 Surgam 300 (exp 12/94), 10x20ml Xyllocaine 0.5%, 30 Maloprim (exp 6/94), 97 Celance 250 mcg (exp 8/94), 32 Didronel 200mg (exp 6/94), 25 Valoid. Tel: 081-449 0909.

TRADE LESS 30%+VAT+POSTAGE - Tagamet syrup 600ml (exp 8/94), Pepcid 40mgx28 (exp 11/94), Ganid 3+0.5 (exp 6/94), Nicabate 14mgx14 (exp 11/94), Nicabate 7mgx14 (exp 10/94), Relifex 500mgx56 (exp 7/95). Tel: 0766 830437.

TRADE LESS 30% - 12 Boxes Convatec S873, 6x112 Intal Co Spincaps. Tel: 0532 716959.

TRADE LESS 30%+VAT+POSTAGE - 28 Zithromax 250mg (exp 4/95), 10 Orelox tabs (exp 8/94), 43 Half Securon SR (exp 9/94), 28 Tildiem LA (exp 7/94), 149 Nitoman (exp 3/96), 100 Sinemet 275 (exp 8/94). Tel: 0524 64921.

TRADE LESS 50%+VAT+POSTAGE - Blue Line bandage 10cmx3mx6, 7.5cmx3mx10. Tel: 0268 794449.

TRADE LESS 50%+VAT+POSTAGE - Hypovase 1ml, Suscard buccal 5mg, Lox-apac 10mg. Tel: 091-536 4640.

TRADE LESS 30%+VAT+POSTAGE - 2x100 Nardil (exp 10/94), 90 Trental 400 (exp 12/94), 2x100 Pro-Banthine (exp 6/95), 1x15 Ortho-Gynest pess (exp 12/94), 2x28 Flexin 75mg (exp 7/95). Tel: 0742 343615.

TRADE LESS 30%+VAT+POSTAGE - Influvac syringe pack, 3x10x100ml Urotrainer Chlorhexidine, trade less 20%+vat+postage 2 Suprefact spray. Tel: 081-841 1585.

TRADE LESS 15% - 10x84 Ditropan 5mg, 1x500 Cystrin 5mg, trade less 25% Bard Uriplan Biocath DT 226912 long term Foley catheter. Tel: 0904 642557.

TRADE LESS 40%+VAT+POSTAGE - 5x30 Biotrol Elite 36-835, 3x30 Macrodom GS 7654, 120x5x1ml Bricanyl amp (exp 5/95), 9 Zofran 4mg (exp 2/95), 7 Zofran 8mg (exp 4/95). Tel: 0707 262242.

TRADE LESS 40%+VAT+POSTAGE - 58 Asendis 50mg (exp 1/95), 1x50 Creon 25,000 (exp 8/94), 41 ethinyloestradiol 1mg (exp 5/95), 2x100 Calcichew (exp 6/95), 1x28 Bambec 10mg (exp 10/94). Tel: 0279 422909.

TRADE LESS 30% - 2x56 Pranoxen tabs 50mg, 5x20x2ml Pulmicort Respules, 60 Cedocard 40mg, Creon caps, 2x84 Catapres 0.3. Tel: 081-399 4854.

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MARTINDALE - 27th edition, good condition £30. Tel: 0286 880323.

WANTED

MARTINDALE 30TH EDITION. Tel: 0708 743341.

POLAROID PASSPORT CAMERA - Express kit 403. Tel: 0582 21760

MARTINDALE 29TH EDITION - In good edition, require 10 copies. Tel: 081 648 0751.

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Aboutpeople

Professor Li Wan Po collects the plaudits



Professor Alain Li Wan Po of The Queen's University of Belfast (left), receives his Fellowship certificate from president Dr William Woodside of the Pharmaceutical Society of Northern Ireland

"In Northern Ireland we are fortunate to have someone of the calibre of Alain Li Wan Po. He has a love for Northern Ireland — not only is he a good ambassador for pharmacy in the country, but for Northern Ireland itself."

So said Pharmaceutical Society of Northern Ireland president Dr Willie Woodside, presenting Professor Alain Li Wan Po of The Queen's University of Belfast, with his Fellowship certificate.

Dr Woodside said that although Alain Li Wan Po was a person of exceptional ability, "like most people in the scientific world, he is humble, courteous and sincere". These qualities made him highly respected by his fellow professionals, not only in Northern Ireland, but throughout the UK and further afield.

Earlier Dr Woodside tracked Prof Li Wan Po's progress from graduating with a first degree from Bradford University to gaining a PhD at London. He became senior pharmacist at St Thomas' Hospital, and then moved to Boots in Piccadilly. His "prolific writing" was noted, including his first book, entitled "Non-Prescription Medicines" (based on a series of OTC articles written for *Chemist & Druggist*).

Dr Woodside noted Prof Li Wan Po's "deservedly high reputation for research both at home and internationally", his work as a consultant, and his service on various committees.

Professor Li Wan Po said he

was fortunate to have spent the last ten of his 20 years in pharmacy in Northern Ireland. "I am grateful for the honour, although mindful that in pharmacy your work is never just your own."

Professor Li Wan Po paid tribute to his parents who, 60 years ago, left China for Formosa, and from there moved to Mauritius where he was born and educated.

Paul gears up for first time at Silverstone

Devon pharmacist Paul Dishman realises a long held dream when he races at Silverstone this weekend.

Paul, owner of St Thomas and Exwick pharmacies in Exeter, took up saloon car racing last year as a way of "getting away from the pressures of work." It appears to have worked — "my wife says I am more relaxed," he admits.

But surely this is a dangerous hobby? "I've been more scared driving around the M25," he says.

Sunday sees Paul race his supercharged Volkswagen Polo in the first round of the Polo G40 Cup. The course, at 12 laps, is "fairly short", although the following nine rounds include longer courses. Paul intends to compete in all but the final race.

FHSA adviser wins MBA

Sharon Hart, the 30 year old pharmaceutical adviser at Bucks Family Health Services Authority, has just graduated after four years' study at the Open University with an MBA.

Finding the time to study was not easy — leisure time and social engagements were cut down — but Sharon says the course was enjoyable. "I have benefitted, and although it was hard work I would recommend it to anyone."

Sharon was sponsored by the FHSA in undertaking her degree. She decided to pursue an MBA nearly a decade after qualifying as a pharmacist "because of the need to understand more of what was going on in the outside business world and to be able to apply its business techniques within the NHS".

Initially appointed to run a related pilot project before she got her present job, she says studying for an MBA gave her the confidence to apply for the post.

Her husband Richard, a marketing manager for BP Chemicals, worked alongside her doing his own Open University MBA at the same time. Nothing like keeping it in the family! Both will be graduating the weekend after Easter up in Harrogate.

She is one of 729 people who has graduated with an MBA this year, the Open University's 25th anniversary.

Vantage retail evenings

Vantage are planning more than 20 retail training evenings during 1994. Dates and venues for April and May are:

- March 29 Swallow Hotel, Kingsway West Dundee
- April 13 Forte Crest Hotel, Kingsway Circle, Swansea
- April 14 Forte Crest Hotel, Castle Street, Cardiff
- April 27 Lochardil House Hotel, Inverness
- April 28 Palm Court Hotel, Seaford Road, Aberdeen.

Anyone wanting to attend a training evening should contact Vantage on 0928 717070.

Appointments

W. Rees Withers has been appointed to the board of the Intercare Group Ltd as mobility regional director. As well as managing the mobility division he will also be responsible for further organic and acquisitive development.

Denis McGiffen, at present sales director of Philips Domestic Appliances and Personal Care Division, takes over as managing director at the end of the month.

Larry Wilton, current managing director, is moving to the USA as executive vice-president with the Philips Lighting Co.

The Health & Diet Food Co have taken on **Arati Phadnis** as food manager. She will be responsible for the marketing of Holly Mill, Pompadour, and Slymbrand lines.

The group sales director of Scottish Pride, **Norman Ferguson**, has been appointed sales and marketing director at toiletries supplier Sanmex.

Mary Leigh is to succeed Dr John Ball as chairman of the Medical Practices Committee. A solicitor and an existing Committee member, she will serve as chairman for three years.

Lloyds' prickly friends

Out-of-date Complan and babyfood donated by Lloyds Chemists is helping to save injured birds and hedgehogs at the Feathered Friends Wildlife Sanctuary in Hartshill, Nuneaton.

Donations from Lloyds' Chapel End branch had been helping sanctuary manager Christine Allbrighton keep over 600 birds and animals a year alive. But there were problems in meeting the bills for food, over £400 a month, and the sanctuary was threatened with closure. Lloyds head office stepped in with donations of food, vitamins and medication.

Says Christine: "The hedgehogs in my care get through around six boxes of babyfood per day. Their favourite is banana and pear yoghurt!"

What's the most effective NRT for highly dependent smokers?



“In the most highly nicotine dependent smokers (craving a cigarette on waking) nicotine 4 mg gum seems the most effective form of replacement therapy at present.”

(Analysis of the results of 28 randomised trials of nicotine 2 mg chewing gum, six trials of nicotine 4 mg chewing gum, and six trials of nicotine transdermal patch.)¹

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Pharmacia Pharmacia Ltd., Davy Avenue, Milton Keynes, MK5 8PH.

1. Tang JL, Law M, Wald N. *BMJ* 1994; 308: 21-6

Product Information: Presentation: Nicorette Mint Plus contains 4 mg of nicotine in a chewing gum base. **Indication:** An aid to smoking cessation. **Dosage and Administration:** Each piece should be chewed slowly for 30 minutes. After 3 months ad libitum dosage, Nicorette Mint Plus should be gradually withdrawn. Maximum recommended daily dose: 15 x 4 mg pieces. Not suitable for children. **Precautions:** Peptic ulcer, gastritis, angina, coronary disease. **Contra-indications:** Pregnancy. **Adverse effects:** Occasional hiccups, indigestion, hypersalivation, throat irritation. **Package Quantities:** Boxes of 105 and 30 pieces, in blister strips of 15 pieces. £3.98 (30), £10.80 (105) (trade price correct at time of printing). PL No: 0022/0113: held by Pharmacia Ltd., Milton Keynes, MK5 8PH.

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The No.1 treatment for heartburn is going from strength to strength¹

When your customers have **severe or frequent symptoms of heartburn**, give them new **Extra Strength Gaviscon 500** tablets.

The new **Gaviscon 500** OTC dedicated tablets are **lemon flavoured**, a taste that will attract new customers to the brand according to consumer tests, and generate extra revenue for you.

Remember that Gaviscon relieves the pain of heartburn in 4 out of 5 customers.^{2,3,4}

So if they've got **severe symptoms of heartburn**, give them new **Extra Strength Gaviscon 500** lemon tablets.



GAVISCON

**Keeps acid where it works
not where it hurts**

Gaviscon Essential Information

Product Information. Active Ingredients: Liquid Gaviscon: Sodium alginate BP 500mg, sodium bicarbonate Ph. Eur. 267mg, calcium carbonate Ph. Eur. 160mg per 10ml dose. Gaviscon 500 Tablets: Alginic acid BP 500mg, sodium bicarbonate Ph. Eur. 170mg, dried aluminum hydroxide gel BP 100mg, magnesium trisilicate Ph. Eur. 25mg per tablet. Gaviscon 250 Tablets: Alginic acid BP 250mg, sodium bicarbonate Ph. Eur. 85mg, aluminum hydroxide gel BP 50mg, magnesium trisilicate Ph. Eur. 12.5mg per tablet. **Indications:** Liquid Gaviscon & Gaviscon 500 Tablets: Heartburn, including heartburn of pregnancy, dyspepsia associated with gastric reflux, hiatus hernia and reflux oesophagitis. Gaviscon 250 Tablets: Heartburn and acid indigestion. **Contra-Indications:** None known. **Dosage Instructions:** Liquid Gaviscon: Adults and children over 12: 10-20ml, children 6-12: 5-10ml liquid after meals and at bedtime. Children under 6: Not recommended. Gaviscon 500 Tablets: Adults, children over 12: 1 or 2 tablets after meals and at bedtime. Children under 12: not recommended. Gaviscon 250 Tablets: Adults and children over 12: 2 tablets as required. Children

under 12: Not recommended. Chew tablets thoroughly before swallowing. **Note:** 10ml liquid contains 6.2mmol sodium. One Gaviscon 500 Tablet contains 2.1 mmol sodium. Both liquid and tablet forms of Gaviscon are sugar-free. **Retail Prices:** Liquid Gaviscon 100ml £1.60, 200ml £2.86, Gaviscon 500 Tablets 12 £2.45, Gaviscon 250 Tablets 24 £1.95. **Product Licence Nos:** 44/0058 Liquid Gaviscon, 44/0140 Liquid Gaviscon Peppermint Flavour, 44/0141 Gaviscon 500 Tablets, 44/0103 Gaviscon 250 Tablets, 44/0143 Gaviscon 250 Lemon Flavour Tablets. **Legal Category:** GSL. **Method of sale:** Through registered pharmacies. **Holder of Product Licences:** Reckitt & Colman Products Limited, Dansom Lane, Hull HU8 7T. GAVISCON and the sword and circle symbol are registered trademarks. **Date of preparation:** 25/1/94. **References:** 1. Taylor Nelson Counterpoint MAT to June 1993. 2. Chevrel B (1980) *J. Int. Med. Res.* 8: 300. 3. Ward A.E. (1989) *Br. J. Clin. Pract.* 43: (2) Suppl. 66: 52. 4. Williams D.L. et al. (1979) *J. Int. Med. Res.* 7: 551.

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MARCH 1994

Babycare



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DOS AND DONTs**

**VITAMIN
LEVELS IN
PRE-
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Look what we delivered in '93



What's in store for '94?

Over the past 3 years Farley's have continued to deliver the fastest growing babyfeeding range – new packs, new

products and new advertising. This investment continues in 1994 with a further £10 million support package and...

SO FARLEY'S SO GOOD





Babycare

A CHEMIST & DRUGGIST SUPPLEMENT

Pre-pregnancy — a danger time
for nutrition and foetal development

Taking the rough with smooth
Quiet times and toddler dissent

Dealing with grips with asthma
How to spot the signs

European implications
Good news for pharmacists



How to cope with feeding
When to add what to babyfoods



Ask monitor
When scheme by September?

A case for investigation
Shake up in the nappy sector

Product review
Round-up of the equipment arena

A new sauce of profit from Milupa.



Introducing a new concept in baby feeding, Milupa Baby Sauces. A simple yet tasty range that's destined to be a constant 'sauce' of inspiration for mothers who want to add more variety and flavour to home-prepared food.

There are three delicious varieties to choose from: Cheese, Tomato and White. Available in 120g tubs, each is specially prepared for babies from 6 months through to toddler age and beyond.

So, if you're looking for a new 'sauce' of income, stock up now. And just watch the profits pour in.

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Experts in
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See your representative or ring our Sales Department on 081-573 9966. Milupa Ltd., Milupa House, Uxbridge Road, Hillingdon, Uxbridge, Middlesex UB10 0NE.

Pre-pregnancy — the susceptible period

The Department of Health's recommendation that women who are planning a pregnancy should increase their intake of folic acid implies that there is a susceptible period in which folic acid is particularly important in preventing neural tube defects. When does this susceptible period begin and end? Is pregnancy outcome susceptible to other nutrient deficiencies? Margaret and Arthur Wynn investigate

In 1992, the Department of Health published a booklet which said that in order to prevent a first occurrence of a neural tube defect: "All women who are planning a pregnancy should be advised to take 400mcg folic acid as a daily medicinal or food supplement from when they begin trying to conceive until the twelfth week of pregnancy."

The recommendation followed a study by the Medical Research Council which showed that folic acid supplements of 4,000mcg/day reduced the risk of a repetition of neural tube defects by 72 per cent. This 4,000mcg strength, or if not available 5,000mcg strength, is recommended on doctor's prescription for women who have previously had a child with a neural tube defect.

The DoH recommendation for the daily intake of folic acid in 1991 was 200mcg/day for women of all ages, except pregnant women for which it was 300mcg/day. However the "pregnancy period" definition did not include the time when planning a pregnancy. This is a new and important change and the first recognition by the DoH that women may be more susceptible to some nutrient deficiencies around the time of

conception than at other times of life.

Nutrition pointers

When discussing the importance of the DoH recommendations with customers, it may be helpful to understand that more than half of all women under 35 years old have a daily intake of folic acid under 200mcg, and intakes below 100mcg are not uncommon, according to the OPCS nutritional survey of British

adults. Very few women ever reach the intake of 400mcg/day without the supplements now recommended for women planning pregnancy.

However, many breakfast cereals, and at least one white bread, have had folic acid added, and "Which?" has published a "Folic Acid Factsheet" showing which cereals are fortified and by how much.

Danger zone

The oocyte that eventually

than many processed foods such as white bread and biscuits, which have lost most of their folic acid content.

This affects the subsequent embryo and foetus in three main ways: damage to the genome; damage to the ovum and its

ovulation, but also around the time of fertilisation after the sperm enters the ovum.

But not all mutations result in miscarriage. Some survive. Down's syndrome, for example, is a disease caused by mutation which would die out completely if it were not for new mutations, as Down's syndrome sufferers rarely have children. There are many other disorders — epilepsy, schizophrenia, type II non-insulin dependent diabetes,



becomes the fertilised ovum and the new baby wakes up from a deep sleep about 65 days before ovulation. Before this event the oocyte is very resistant to most external influences. It is only, however, about 14 or 15 days before ovulation that the endocrine system responds to secretions of the developing oocyte and begins to stimulate development. These days are the first half, or follicular phase, of the menstrual cycle.

Susceptibility to environmental hazards, including defective nutrition, some medication, street

luggage; and depressed sex hormone levels.

Genome damage

About 20 per cent of pregnancies reported in the US end in miscarriage, and unrecognised pregnancy loss very early in pregnancy has been estimated as ranging as high as 75 per cent in some populations.

More than half of the recorded miscarriages have chromosomal aberrations, that is, very serious damage to the genome which happens mainly during the follicular stage before

partly maintained in the community by new mutations.

The human genome is most exposed and most frequently damaged by an unsatisfactory environment during the short period before and around conception than at any other time of life.

Folic acid deficiency is one cause of slow-down in follicular development as it is essential to all cell replication and growth. Folic acid deficiency has been known for many years to cause mutations by interfering with DNA synthesis.

Brands of folic acid tablets

Contassium Micro Vitamins	400mcg
Health Aid	400mcg
Janes Preconceive	400mcg
Polgar	400mcg
Roots	300mcg
Starkhill	500mcg
Regaday	350mcg
SC's Folic Acid	400mcg
English Grains Folic Plus	400mcg
Even Seas Folic Plus	400mcg

Ovum luggage

The oocyte, which becomes the ovum at ovulation, grows rapidly during follicular development, increasing in weight by about 10 times. It is not the genetic chromosomes that increase in mass but the rest of the oocyte which begins to transcribe and translate genes primarily into proteins that are used later to direct the initial stages of embryogenesis.

Indeed, the ovum begins its journey with what may be described as necessary luggage.

The long journey to implantation in the lining of the uterine wall.

The genome is a library of instructions necessary for producing the ovum and its luggage. Nothing happens unless these instructions are read and acted upon, which is the role of RNA. At ovulation the oocyte has about 200 times as much RNA as any normal body cell. All of this is produced during the follicular phase. The RNA acts on the genetic code, is an important part of the luggage, and is highly sensitive to its environment.

The RNA of the ovum, as well as the DNA of the genome, is susceptible to damage because of its nutrition, an inadequate supply of folic acid, and to some extent, toxic chemicals and radiation. Defective ova, with inadequate or damaged RNA, may not be fertilised, may fail to divide, or may divide more slowly than healthy ova and produce embryonic growth retardation.

Hormones

Before ovulation, during the follicular phase, may also see hormonal deficiency or imbalance. Follicular development depends on the pituitary hormones, luteinising hormone (LH) and follicle stimulating hormone (FSH). The pituitary only secretes normal levels of LH and FSH at the end of the hypothalamus. The hypothalamus is sensitive to many exogenous factors and the time of ovulation, including smoking, alcohol and drugs. The literature on the effect of medicinal drugs

at this time is limited, but psychotropic drugs, including tranquillisers and analgesics, are known to slow down follicular development and delay ovulation.

At the ovarian level, the key reproductive hormones are oestradiol and progesterone which have concentrations in follicular fluid partly determined by the levels of pituitary hormones LH and FSH. Animal experiments show that the concentration of all these hormones is sensitive to diet, notably to protein and amino acid levels and B vitamins.

Experiments on primates have shown, for example, that folic acid deficiency causes depressed levels of oestradiol and progesterone and delays or prevents ovulation if severe.

The quality of ova and embryos is determined by hormonal promotion of the genetic program during follicular development. This, in turn, determines the hormonal environment after ovulation, of the zygote after fertilisation, and of the early embryo before and after implantation in the uterus.

The follicle at ovulation turns

susceptible than the period before ovulation — not surprising considering the complexity and speed of events within the zygote during the integration of male and female gametes.

causes lengthening of the menstrual cycle. Studies sponsored by the French Research Council (INSERM) have shown that a longer cycle and longer follicular phase are

chronic illnesses, for example diabetes or epilepsy. Medical advice should always be sought and reducing the risks of childbearing may require the help of a specialist.

Booklets about pre-pregnancy care appropriate for customers are available from the Maternity Alliance, 15 Britannia Street, London WC1X 9JP or from WellBeing at the Royal College of Obstetricians and Gynaecologists.

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into the corpus luteum, which is the main source of progesterone until the placenta is large enough to take over. Low levels of progesterone can be associated with early miscarriage.

RESEARCH RESULTS
Research at the Oak Ridge National Laboratory in America has shown that the zygote, defined as the ovum immediately after fertilisation until the end of the first cleavage, is highly susceptible to certain mutagenic agents.

Indeed for some agents and some types of congenital malformation, the hours immediately following fertilisation may be even more

The oocyte before ovulation and zygote after fertilisation appear to be the two stages in the human cycle most susceptible to radiation, chemicals, drugs and nutritional deficiencies.

WHAT MARKERS
What markers are there then that the hormonal status of a woman is unsatisfactory for pregnancy? According to a symposium in 1989 on reproductive toxicology from the United States National Academy of Sciences, "Menstrual cycles constitute the most accessible and non-invasive biologic marker of female reproductive function in humans."

A depressed hormone status

associated with an increased risk of foetal growth retardation and congenital malformation. Abnormally long cycles are commoner during the early and late reproductive years. The causes of a long cycle fall primarily under two headings:

- Faulty nutrition, in practice generally multiple deficiencies produced, for example, by slimming
- Consumption of reproductive toxins, which includes constituents of smoke, alcohol, psychotropic drugs and other unidentified substances.

There are other less common causes such as very strenuous physical activity associated with athleticism, temporary and



Getting to grips with asthma

Asthma is commonly perceived as a mild ailment but its effects can be devastating if not controlled, as June Thompson RGN RM RHV explains

asthma is the most common childhood chronic disease in Britain today, affecting between

10-15 per cent of children. It is the only treatable chronic condition in the Western world which is increasing in prevalence. It is also the most common cause of childhood admissions to hospital, and these are 10 times more frequent than they were 30 years ago.

Asthma can occur from an early age, with the majority of asthmatic children developing symptoms before the age of five. Symptoms develop in 50 per cent of children by the age of three and in 80 per cent by the age of five. Young boys are twice as likely to be affected than girls, although this situation is reversed in adolescence.

Latest available figures show that in 1991, 32 children in England and Wales died from asthma. In 1992, 1,995 people died from asthma in the UK and it is estimated that 80 per cent of these deaths could be avoided.

What is asthma?

Asthma is a common and chronic inflammatory condition of the airways whose cause is not completely understood. As a result of inflammation the airways are hyper-responsive and they narrow easily in response to a wide range of stimuli. Narrowing of the airways is usually reversible, but in some patients with chronic asthma the inflammation may lead to irreversible airflow obstruction¹.

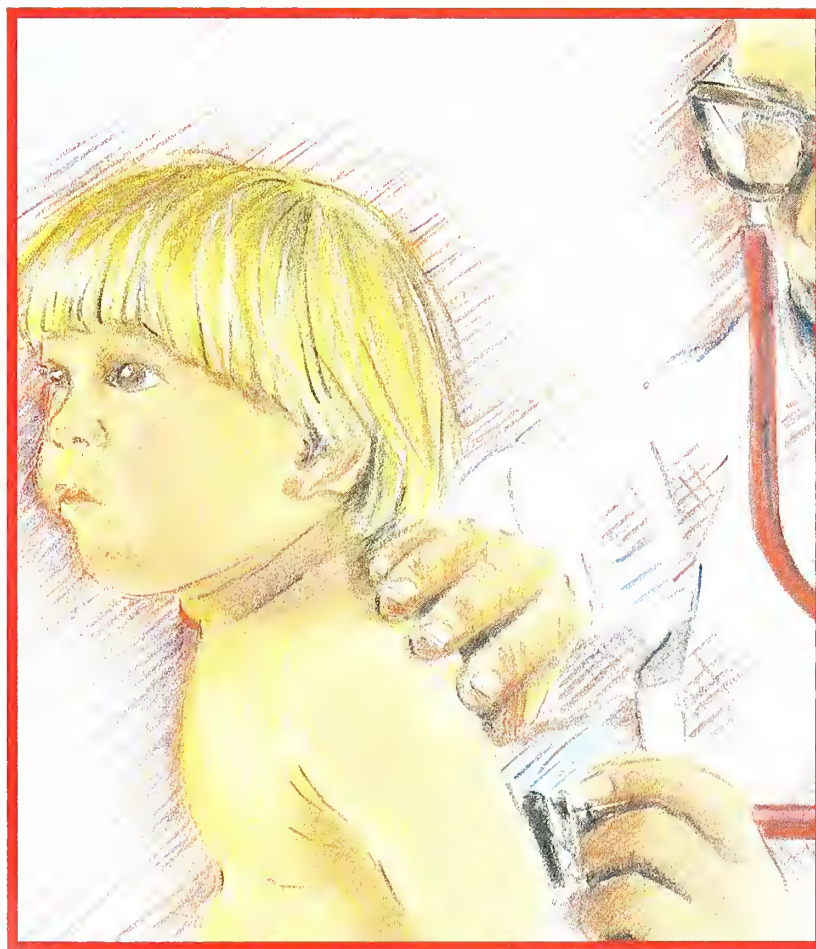
Although asthma is so common, many asthmatic children are thought to be undiagnosed and untreated. This may be because parents or health professionals put symptoms down to an ordinary respiratory infection such as a cough or cold, or because asthma may still be associated in the public mind as a psychological disease.

It is obviously important that children with asthma are properly diagnosed and treated. Although a child may just have an ordinary cough, cold or respiratory infection, asthma should be suspected and the child referred to the GP if

symptoms include:

- wheezing - a high pitched whistle-like sound caused by air moving through the narrowed bronchial tubes
- recurrent or persistent coughing
- tightness in the chest which is often worse at night
- difficulty in inhaling and

coughing and wheezing within about 24 hours which lasts for about a week. Although antibiotics may be given, these may have no effect whatsoever, and the child will continue to have wheezing and coughing attacks, especially at night. A schoolchild may be off school repeatedly with a bad chest or



exhaling

- mucus production
- a family history of asthma or atopy
- poor exercise tolerance or exercise induced symptoms.

Other indications of asthma are repeated attacks of wheezing and coughing accompanied by colds. For many young children however, a dry irritating cough may be the only symptom of asthma.

In the first year of life, asthma occurs in response to viral infections and does not seem to be related to allergies. It almost always starts off with a runny nose, followed by

wheezing, which usually follows a cold.

Asthma symptoms may be precipitated by a variety of trigger factors. These include viral infections; emotional disturbances; exercise; and environmental and allergen factors such as cold air, house dust, cigarette smoke, certain drugs, sulphur dioxide fumes, fuel and paint vapours, sprays from household cleaners and perfumes, feathers, pollens from trees and grasses and pets.

Normal life

If a child is diagnosed as asthmatic, this can be very

worrying for parents. However, children with asthma need to be helped to live a symptom-free, normal life as possible. Pharmacists can play an important part in assisting parents to understand the disease, and in educating them about its management, treatment and outcome.

In about 80 per cent of children, asthma will have subsided by adolescence, but in about 40 per cent of these, the asthma will come back in later life. It is therefore preferable not to tell parents that their asthmatic children will 'grow out of it'.

Parents should be advised how important it is to avoid 'trigger' factors known to precipitate attacks, such as cigarette smoking and use of

Encasing mattresses and pillows in allergen-exclusion barrier covers may be helpful. Bedding should be washed in water above 55°C to kill the mite.

Therapy steps

Recent guidelines by the British Thoracic Society et al¹ recommend the following steps in the management of chronic asthma in children:

Step 1 — Occasional use of relief bronchodilators. Short acting β -agonists 'as required' for symptom relief, but not more than once daily.

Step 2 — Regular inhaled anti-inflammatory agents. Intermittent inhaled short acting β -agonists when needed plus cromoglycate 20 mg three times daily as powder or via metered dose inhaler and large volume spacer.

Step 3 — Inhaled steroids. Inhaled short acting β -agonists when needed plus beclomethasone 50-200ug twice a day. A five-day course of soluble prednisolone 1-2 mg/kg day or temporary doubling of inhaled steroids dose should be considered for stabilisation.

Step 4 — High dose inhaled steroids. Short acting β -agonists when required plus inhaled steroids 400-800ug daily via a large volume spacer. A short prednisolone course can be considered as could adding regular long acting β -agonists twice daily.

Step 5 — A) High dose inhaled steroids and bronchodilators. Inhaled steroids (800ug) and other treatment as in step 4 with slow release xanthines or nebulised β -agonists. B) Addition of regular steroid tablets as in step 5A with the addition of low dose (5-10 mg) prednisolone on alternate days. Ipratropium or the subcutaneous infusion of a β -agonist can be considered.

Stepping down — Regularly review the need for treatment. Stop regular anti-inflammatory treatment after 6-12 months if the symptoms are few or none at all. If symptoms correspond to seasonal variations then anti-inflammatory drugs could be stopped at the end of the season.

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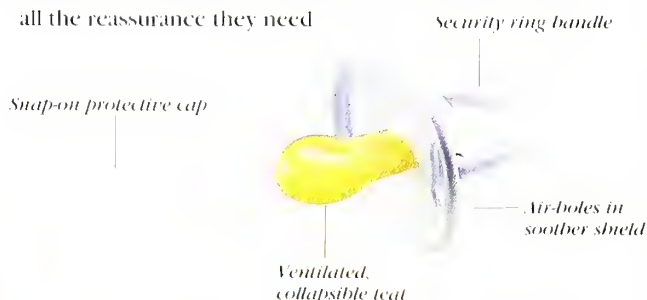
- (1) Guidelines on the Management of Asthma (Consensus Statement British Thoracic Society et al) Thorax 1993; 48: Supplement S1- S24 National Asthma Campaign Asthma management pack

Further information: Pharmacists can obtain further professional information from the National Asthma Campaign, Providence House, Providence Place, London N1 0NT. A Helpline for professionals and the public is also available on 0345 010203.

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Milk monitor

Pharmacists are poised to benefit from a series of changes in the infant formulae market this year. Marianne Mac Donald reports

The infant formulae market is so dependent on the birth rate that any decline has an almost instant effect on manufacturers' turnover.

The rise in births predicted for the past few years has not materialised, especially for first time mums, and has declined by about 3.5 per cent. Also, the formula milk price wars of last year have had an adverse effect. Thus, the market for standard infant formulae (excluding soya milk and follow-on) has dropped by 5 per cent and is worth £83.6 million in value terms (FSA December 1993).

Domination

SMA Nutrition and Cow & Gate are still the dominant players in the market. The former has a 40.7 per cent value share while the latter has a 38.2 per cent share (FSA October 1993), although Crooke's Healthcare say Cow & Gate are showing their poorest performance in pharmacies to date (based on Nielsen data).

Crooke's decided to simplify their baby milk range last Autumn; opting to call the products Farley's First and Second and dropping the Ostermilk label completely. The company believe this is paying off with the latest Nielsen data revealing that the brand has a 14.2 per cent share in pharmacies, their highest recorded level.

Milupa are still the poor relation in terms of baby milks but they are confident that this is going to change. Sales and marketing director, Anthony Bush predicts: "I think in the next four months you will find the market will have changed significantly."

Bolstering this confidence is the claim that Milupa Milumil is the fastest growing casein-based

formula in multiple pharmacies with a 24 per cent year-on-year growth (Nielsen, December 1993).

Follow-on success

Despite the bleak news on the standard infant formula front, sales are being pulled back through follow-on milks. This sector has risen by a massive 80 per cent and is now worth £16.4m. Market penetration has doubled in the last year but is still quite low at 11 per cent.

Health professional opposition, which has been vociferous, has calmed down and Sally Wade, market research manager at SMA Nutrition says: "Recent trials in iron-deficiency anaemia are coming out in favour of follow-ons."

SMA's Progress is still the market leader with a 47.4 per cent value share while Cow & Gate report that their Step-up brand has achieved 21 per cent volume and market share after being available for less than a year (year ending October 1993).



Farley's relaunch has proved successful in pharmacies



SMA still retains its position as brand leader in the milk sector

Last Autumn saw Farley's follow-on milk change from Junior to the more obvious Farley's Follow-on and in October the brand had a 23 per cent value share of the market. It is too early to say what effect the relaunch has had on the market but Richard Simpson, senior baby milks product manager, reports excellent ex-factory sales.

In addition, they launched a strawberry follow-on as a means of coaxing babies to continue drinking infant milk. "Any method to get them drinking is good," says Mr Simpson.

Nearly all the manufacturers are competing in this sector, the exception is Milupa. Anthony Bush from Milupa says the company are European leaders in follow-on milks and does not see them remaining out of the British market for much longer.

Certainly the company is promising to be as active this year as they were last year so it looks like only a matter of time before a fourth follow-on milk hits pharmacy shelves.



Cow & Gate's Step-up is said to be performing well

Welfare milks will push professionalism

The words "national milk token scheme imminent" may seem like a euphemism for "well, we're getting round to it, but not yet", but the Department of Health are hoping it will finally happen this September.

As yet, everyone is playing coy with the financial implications and discussing the administrative aspects. The Department of Health have put forward a proposed scheme which has not met with the approval of relevant parties.

Mary Allen, head of information at the National Pharmaceutical Association, who has been involved with the scheme since its inception three years ago says "We felt the proposals were too cumbersome and took in too many variables."

But John Braithwaite of the DoH disagrees: "It is not as cumbersome or difficult as people have tried to suggest."

The two-tier credit note suggestion means pharmacists make their own arrangements for obtaining milks with no financial outlay. Credit notes will be issued by the Department of Health to participating pharmacists (the fee for participation has yet to be agreed). These notes will be used to pay pharmacy wholesalers who in turn have another tier of credit notes

which they return to the manufacturers. They are then reimbursed direct by the DoH.

A further recommendation means that there are different prices for different brands. Not only would this be more time consuming for pharmacists, manufacturers are concerned that this method is open to abuse.

But Mr Braithwaite says this is unlikely to happen: "They are professionals and even if they are tempted the amount they can make out of it compared with the penalties make it not worth the trouble." The NPA are pushing for a flat rate per tin to reduce the amount of paperwork pharmacists are faced with.

Mr Braithwaite is eager that concerned parties come up with a scheme which would be easier to operate: "We could make it simpler but to fulfil the requirements of all parties this is very difficult to do." But he remains optimistic that agreement will be reached quickly.

Judith Holloway, marketing manager at Milupa, points out that a community service such as welfare milks has to have good distribution. "You have to make it worthwhile to a pharmacist to get involved. Generally speaking manufacturers support pharmacy and they must get paid to do this scheme."

Promotions

- SMA have two underlid promotions planned for Spring: the Wysoy promotion offers consumers the chance to buy an SMA rabbit while including a recipe for chocolate blancmange made with Wysoy. The Progress promotion offers customers the chance to buy Progress splat mats, place mats and beakers. Pharmacists can win one of 350 chairs being offered by SMA sales representatives. The company is also providing pharmacists with information about baby milks to help them give advice under the terms of the new EC directive.
- Milupa are concentrating their efforts on providing educational material for health professionals and mothers.
- Cow & Gate are still sponsoring GMTV's Mother and Baby programme which is said to be reaching 42 per cent of the target audience. They are also continuing with their direct mail In-Touch campaign, which was launched last October. Some 5,000 mums contact C&G each week to join the programme and this is likely to play a major part in product promotion plans throughout the year.

A world first breakthrough in infant formula.

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Milupan is a unique new fat blend, containing these vital long chain lipids, which we have added to our starter infant milk, Aptamil. This makes new Aptamil with Milupan a world first. It's the only infant milk that provides the long chain lipids babies need for early development. What's more, it provides them in a similar quantity and ratio to breastmilk.

So, for mothers who decide to bottlefeed their baby from birth, or just to breastfeed for a short time, new Aptamil with Milupan has to be the obvious choice.

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See your representative or ring our Sales Department on 081-573 9966. Milupa Ltd., Milupa House, Uxbridge Road, Hillingdon, Uxbridge, Middlesex UB10 0NE.

IMPORTANT: Breastfeeding is best for a baby. A doctor, midwife, nurse or health visitor should be consulted for any advice needed. If an infant milk is used, it is important for a baby's health that all preparation instructions are followed carefully.

European implications

es, it's official: pharmacists are now deemed to be sufficiently qualified to give advice to mums on baby feeding and infant formula, according to the proposed EC directive on infant formulae, due to be implemented by June. The directive is good news for pharmacists but has caused problems for infant formulae manufacturers.

They adopted their own voluntary code in 1983 which banned advertising in parenting Press but allowed advertising in baby publications which were distributed by health professionals.

While the EC directive allows manufacturers to advertise again in the parenting Press, the UK Government is proposing further additions to the directive to ban all direct advertising, including health professional distributed publications. Instead, advertising will only be permitted in scientific publications. This could result in pharmacists being one of the first ports of call for advice on feeding.

Manufacturers are very

unhappy with the proposal and are in the process of lobbying Parliament to ensure these changes do not take place.

"Basically mothers are being restricted and we are being censored," says Anthony Bush, Milupa's sales and marketing director.

Don Barrett, corporate affairs director at SMA Nutrition, says, "At a time when the Government is passionately going for de-regulation we are faced with legislation which

goes against this policy."

"We need to ensure that mums receive sound advice and information," is the concern of Niall Bowen, marketing director at Cow & Gate.

Which is where the pharmacist comes in. Whatever happens with the advertising issue the manufacturers welcome the belated acknowledgment of pharmacists as health professionals and they have put together a variety of educational material to ensure that pharmacists can give advice on anything from casein content to lipid addition.

Soya milks in caries concern

The BBC's *Watchdog* programme has criticised soya infant formulae claiming that they cause premature dental decay in children. The milks don't contain lactose but do contain glucose.

The programme cited the case of one child who had been given a soya formula from birth until 30 months-old. Now aged four and a half, the child has had fillings and teeth removed.

Don Barrett, corporate affairs director at SMA Nutrition, points out that any food could cause caries if in contact with teeth for a long time.

"It's not a question of the

amount of sugar or the type, it's actually the feeding regime and dental hygiene that goes along with it," he says.

● The soya market is still growing, says Sally Wade, market research manager at SMA Nutrition. "This sector is almost totally script based, around 90 per cent is on prescription, and therefore of special interest to the pharmacist," she says.

SMA's Wysoy brand leads the market and claims to have a 72.4 per cent volume share. The remainder is split between Cow & Gate's Infasoy and Farley's Osterosoy.

Goat's milk for eczema

Nanny is a goat milk infant formula which is, say, manufacturer's Vitacare, suitable for use in babies who cannot tolerate cow's milk and can, in some cases, improve eczema.

The company is engaged in a campaign to increase GP prescribing and awareness of the product. The Advisory Committee on Borderline Substances have permitted prescribing pending Vitacare's full submission to them later in the year.

Nanny has low levels of alpha-S1 casein which Vitacare say is a heat stable allergen present in cow's milk, and contains smaller fat droplets which make it more digestible than cow's milk. It is also sucrose and glucose free.

Some babies who have eczema have shown a marked improvement in their condition once switched to Nanny. But David Harvey, senior lecturer in paediatrics at Queen Charlotte's and Chelsea Hospital hopes that more scientific work will be done to compare goat milk with standard infant formula for growth and development.

Nanny is available through AAH and Barclay in 400g tins which retail at £6.75. Vitacare. Tel: 081-443 7089.

Milupa fats in the fire

Last Autumn will probably be best remembered for the "fat controversy" surrounding Milupa's addition of long chain polyunsaturated fatty acids to their full-term formula milk, Aptamil. "It's been presented as a major novelty but really it's just an improved fat blend," says Milupa's scientific director Joe Eastwood.

While LCP addition to formula milk was accepted as clinically correct in premature babies, there were doubts about the validity of addition to full-term milk.

There were also mutterings that the optimum sources and levels of LCPs in formula milk have not been fully determined and that Milupa were too hasty with their launch.

Mr Eastwood disputes this, "What they are doing is whistling in the dark." Milupa's source is the humble egg which has an LCP mix similar to breast milk, a level which has been well documented, he says. The

extraction and purification methods remove all remnants of egg protein, leaving the necessary LCPs.

Marla Watts, SMA Nutrition's dietician has reservations about eggs as a source. "Eggs are not introduced into the weaning process until later and we don't know what effects this will have on children," she says.

Milupa report that sales look promising for Aptamil with Milupan while the pre-term version, Prematil, is within one per cent of the market leader in hospitals.

Cow & Gate are investigating LCP addition using marine oils which give adequate levels of ω -3 LCP but low levels of ω -6 LCP. To overcome this, Cow & Gate are adding another ω -6 LCP, gamma-linoleic acid, says Ms Watts. This results in a ratio of 1:10 (ω -3: ω -6) as opposed to the European Society of Paediatric Gastro-enterologists and Nutritionists' recommended 1:2 ratio.

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The Aptamil with Milupan controversy looks unlikely to abate

How to cope with feeding

The weaning process can be a trying time for any mum, without the additional worries of nutritional quality. Yet mothers may still need some help getting to know their food groups. Jane Nichols investigates

The desire to give children the best possible start in life is part of human nature. From creating the ideal nursery environment to buying the right clothing or accessories, it's an expensive, but exciting time for most parents.

The need to provide doesn't stop at material levels either. Providing the right dietary ingredients is an equally pressing concern for most mums.

Yet for many, nutritional issues are very confusing, complicated by the fact that for some new mothers this may well be the first time in their lives they seriously think about nutrition.

Dietary advice

Ten years ago, many new mums would have been able to rely on their mums and grandmothers for some feeding advice, even if it all of it was 100 per cent accurate.

With the increasing fragmentation of the family network, however, this chain of information has been heavily restricted. So pharmacies have an invaluable contribution to make in educating and aiding concerned parents.

One of the biggest problems is that many women don't eat nutritionally balanced meals anyway, so building up a good diet for weaning and onwards may not come naturally.

Furthermore, some mothers may be unaware of when to introduce weaning, what exactly weaning is or how to recognise the signs that baby is ready to move onto solids.

All issues which are particularly important when you consider the latest report on infant day practice in infant feeding by the Department of Health.

It states that the premature introduction of solids is undesirable before three to four months old because, not only are the babies unable to bite and chew as well as being unkeen to experiment with different flavours, textures on consistencies, but more seriously a child's gut may actually be



more "vulnerable to infection and to allergy".

The trend today is for mothers to encourage baby to eat with the family as soon as possible, but this may result in some "home fed" babies failing to receive the correct nutritional ingredients, or "overdosing" on normally excluded ingredients, such as salt and sugar, simply through their inclusion in the family's everyday diet.

It may therefore be well worth highlighting the major, basic concerns on infant feeding practices, opening up the pharmacy as a discussion point on all nutrition worries.

According to a report by Schubert Tatzert, carried in Early Human Development, preference for sweet-tasting foods and drinks appears to be an innate human attribute in premature infants. Indeed, breast milk itself contains about 7 per cent sugar.

However, dental caries continues to be a problem in the UK, in spite of work that has been done over the past few years. A fact which is often not helped by mothers who, upon tasting baby's food, decide it is far too bland and add further sugar.

Manufactured babyfoods already have sugar added to them but as it is found naturally in fruit, vegetable and milks, mothers creating their own foods

should be advised not to add further sugar to the diet.

Excessive salt intake at infancy or indeed at any stage in life is not good. According to the DoH excessive intake of sodium in young children can lead to hyponatraemia — raised sodium levels in the blood.

And the DoH reports a small but significant relationship between sodium intake and blood pressure in infants, and between sodium intake in infancy and hypertension in adult life.

Excessive salt could also result in a high renal solute load, creating excess strain for baby's kidneys.

The debate over whether cow's milk should be used in baby's under 12 months old continues, with groups like the Baby Milk Action Group continuing to state that breastmilk is preferential in all cases for the first year.

The main concerns with cow's milk centre around the lack of essential vitamins A, C, D, and iron deficiency which, as well as causing anaemia, may, the DoH state, cause the impairment of psychomotor function and defects in cellular immunity.

Iron deficiency may also result in a small but permanent reduction in a child's learning ability, behavioural problems, tiredness and poor growth. Indeed, babies would have to drink 28 pints of cow's milk a

day to meet the Reference Nutrient Intake for iron, says Fiona Hunter, nutritionist at the Good Housekeeping Institute.

Symptoms of iron deficiency include fatigue, insomnia and slow weight gain.

Past a year old however, babies should be consuming a pint of pasteurised milk a day.

It may also be worth reminding mothers when it comes to milk that babies should always be given the full fat variety. Particularly as, according to the DoH, restriction of the total fat and saturated fatty acids will, unless compensated for, result in reduction of energy and nutrient intake.

Gluten sensitive enteropathy, or coeliac disease, is a disorder of the small intestine which is caused by patients reacting to the consumption of gluten found in wheat, rye, barley, oats and in foods made from these cereals.

Sufferers of coeliac disease literally starve while eating normally, because they cannot absorb the nutrients in the food.

Babies suffering from coeliac disease appear healthy until they are introduced to food containing gluten. Then there are visible changes to the child such as loss of weight, and with their stools becoming pale and offensive smelling.

As an allergic reaction, with genetic links, gluten free diets are preferable for babies to prevent the kind of gut reaction described by the DoH above, at least in the earlier stages of baby feeding, although the onset of coeliac disease can happen at any age.

This is a new growth area for



Warner-Lambert claim that Abidec Multivitamin Drops is the leading brand in the children's vitamins sector. Last year's re-packaging has helped strengthen its position as a strong revenue earner, says the company

many manufacturers, yet this isn't simply a created, niche arena. The COMA report recommends that vitamin supplementation should be given to infants and young children from aged six months up to at least two years and preferably five years.

Although cases of vitamin deficiency are rare, and most pre-made babyfoods already contain additional vitamins, considering the amount of "goodness" which is destroyed by current cooking practices, supplementation helps to act as a safeguard from vitamin deficiency.

Pasta delight for coeliacs

General Designs have expanded their range of products suitable for coeliac sufferers with the addition of the Pastaro range of pastas, made from brown rice and purified water.

All the products are guaranteed to be 100 per cent gluten free, while containing no additives, binders or chemicals.

In addition the company offers Ener-G gluten-free brown rice bread, white rice bread and tapioca bread, all of which have a shelf life of six months. For further information contact the company on 081 336 2323.



Sales of the Mivadex brand are up 81 per cent, giving it a 23 per cent share of the £15 million children's vitamins market. The range has just been expanded to incorporate Mivadex-Sugar-Free Vitamin Drops, which is a re-branding of Adexolm Vitamin Drops

Taking the rough with the smooth

fter the frenetic enterprises of last year, the past few months have quietened down considerably. Companies appear to be more concerned with consolidating their positions than launching new products. Or perhaps they feel that it's the consumer who needs time to adjust to the increasing array of goodies on pharmacy shelves.



Heinz relaunched range

In summary, last year we witnessed: relaunches from Heinz and Crookes Healthcare; Cow & Gate launching Olvarit's toddler variety while discontinuing the original range; and Milupa introducing a new concept to the market with their range of baby sauces. No wonder they're taking time for a breather.

The latest PSA figures reveal a 6 per cent year-on-year increase bringing the value to £121 million, although in volume terms there was an overall drop of 1 per cent.

Relaunch boost

The split between dry and wet meals has shifted slightly, moving back into wet meals' favour: wet meals have shown a 9 per cent increase in value terms to account for £58.3 million of the market. Dry meals report a 3 per cent rise in value terms to £41.7m. This increase in value terms has been attributed to the greater proliferation of premium priced goods and price rises above the level of inflation.

Jane Thompson of PSA believes that wet foods have benefited from the Heinz relaunch and the introduction of Cow & Gate for Toddlers. She also singled out the success of Boots own label brand which, coupled with increasing sales through groceries, is pulling sales



Farleys are reaping the benefits of a relaunch

away from the independent pharmacy sector.

Heinz say their share has grown in independents, helping to boost it 8 per cent from 49.2 per cent in October 1992 to 57.8 per cent in October 1993. "Cow & Gate have always been strong in pharmacies, but this has been affected as we call on more pharmacies now," says Roger Hobbs, Heinz' category manager.

Milupa claim to be the overall

more cash for retailers," says Niall Bowen, marketing director at Cow & Gate. Looking at the overall babyfood market, he says, Olvarit has a 15 per cent share.

Cow & Gate have a minor presence in the dry meals sector with Pure Baby Rice which is heading for a relaunch in April. Gone are the 200g packs to be replaced with 100g packs and an inner foil bag for improved freshness. The re-packaging is to



Milupa's sauces show promise with consumers

brand leader among dry and wet foods, with a 30 per cent share of all sales in pharmacies and 60 per cent of the dry foods market.

It's too early to say how well Milupa's latest venture, the Baby Sauces range, is doing. "Distribution among pharmacies has been extremely good, with initial sales figures looking equally promising," says group product manager Maura McGuire.

Cow & Gate's share in the market has diminished since the discontinuation of the original line. "At the outset of the rationalisation programme we expected that we would lose market share but the whole point was to end up with a higher quality baby meal which generated more profit for us and

be colour coded so that the rice can be merchandised between baby milks and baby meals.

Farley's report a 4 per cent increase in sales following their relaunch, bringing them up to 40 per cent. January's relaunch of Farex baby rice as Farley's First Timers has been similarly successful.

Barbara Hodgson, category manager for Farley's baby foods, thinks the early weaning trend is growing, which is good news for pharmacists. "The trend is for women to go to pharmacies rather than supermarkets to get weaning advice, she says.

Robinsons' brand share has diminished to 3 per cent while rusk-wise Farley's are still the brand leaders with 87 per cent of the market.

1993 recipe challenge

Unpublished research reveals that while home made baby foods contain recommended nutrients, they are often not in recommended quantities.

To bring this to light, Cow & Gate are launching the Olvarit Homemade Recipe Challenge in April to encourage parents to create a new babyfood recipe for its Olvarit meals range.

The winning recipe will be developed as a test recipe for the range and the winner will receive a £5,000 trust fund for baby with two runners-up winning £1,000.

Entrance leaflets include nutritional tips and will be available from pharmacies and through parenthood and women's Press.

Toddler targets

ith a declining birth rate, toddlers are key to developing the baby care market.

Cow & Gate estimate the toddler sector could grow by four times its current value.

The company launched two toddler ranges last year — Olvarit Toddler Drinks and Toddler Meals and already claim to have captured a 6 per cent value share of the total pharmacy drinks market with the drinks range. In the ready-to-drink sector they say they have a 22 per cent share, which has been achieved through incremental growth rather than taking value away from the existing drinks range.

In the baby meals division Cow & Gate say that Olvarit Toddler varieties are now their top three best sellers in the whole Olvarit range. Given these successes, why are other manufacturers not following suit?

Certainly Farley's babyfoods category manager, Barbara Hodgson, agrees that the toddler market is untapped. In contrast, Heinz category manager Roger Hobbs feels that Cow & Gate are inserting an artificial stage into the weaning process.

"Babyfood exists as a bridge between adult foods. Most mums want it to be short to show that their baby is making progress on to home made family foods," he says. "I'm sceptical about the opportunity here, I don't believe it exists."

Niall Bowen, marketing director at Cow & Gate dismisses his comments. "The market has seen more innovation from Cow & Gate than from anyone else in the recent past. Heinz's view of the toddler market explains why the innovation is here."

Ms Hodgson believes that there are opportunities among the toddler sector, despite also saying that the trend is for earlier weaning. "Guidelines say that babies should not be weaned before three months, but the evidence shows that they are being weaned then or even before," she says.

So why would they want to expand the time spent weaning them? It's a tricky question to answer, says Ms Hodgson, but consumer research shows that products made by non-specialist manufacturers are used by mums. "Mums are crying out for baby foods which have less sugar and are more healthy," she says.

Mr Bowen acknowledges Heinz's view of the weaning process but feels that mums still want toddler foods as there are other powerful influences at work. "More women are returning to work after having a baby and there is an increasing reliance on convenience foods."

It could be that Cow & Gate have set other manufacturers thinking, but they may not take the same route. Instead we could see a special range of "convenience" snack foods, such as microwavable products.



C&G's toddler sector comes in for criticism



The Top Seller.



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Milupa has been the top selling dry babyfood brand in the UK for years. And we're still growing. In fact today, we are the top selling brand in pharmacies amongst all babyfoods, wet and dry. Of course, we're not just the top seller, we're also the top innovator in every sector of the market.

As part of our commitment to innovation we've launched the first complete range of dry Junior Foods across all mealtimes, to add to our successful range of Infant Foods.

We've also just created a totally new concept in baby feeding with Milupa Baby Sauces. And we've scored another first with the introduction of the only sugar free herbal baby drink on the market.

Whilst we've been doing all this in the babyfoods market, Milupa has also made a world breakthrough in the infant milks market. New Aptamil with Milupa is the only infant milk to provide the important long chain lipids (LCPs) present in breastmilk that babies need for early development.

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*Source: A.C. Nielsen Total Pharmacy £12 m/e S/O 93

IMPORTANT: Breastfeeding is best for a baby. A doctor, midwife, nurse or health visitor should be consulted for any advice needed. If an infant milk is used, it is important for a baby's health that all preparation instructions are followed carefully.

Another typical British Summer helped push the baby drinks market down by 10 per cent to £21.1 million (FSA year ending December). The poor Summer is only one of several reasons for this year's disappointing performance: the bad Press about baby drinks' sugar content (not helped by the recent Advertising Standards Authority's decision to uphold a complaint against Sugar-Free Ribena); the downturn in the



Milupa's Sugar-Free Fennel

birthrate; and the recession are others.

Rebecca Blackburn, category manager at Heinz, believes none of these factors point to a terminal decline: the birth rate looks to be rising, the economy is rumoured to be on the upturn and a glorious Summer could be on the way.

Last year all the baby drinks manufacturers were fairly active with relaunches and new additions. And Heinz made their first foray into the drinks market with their economy size ready-to-drink Pure Juice last October.

It's too early to tell how well it is doing but the company is very pleased with the support it's been getting, particularly from pharmacies.

At the launch, pharmacies led the way with some 60 per cent of sales. There are rumours that they are intending to launch a novel product soon. Ms Blackburn hints: "The market is looking for something innovative."

Colman's of Norwich relaunched their Robinsons baby fruit juice drinks range last September, complete with dental health symbols.

Robinsons claim to have a 23.4 per cent brand share, just behind the leaders, Cow & Gate.

The company says that 58 per cent of drink sales come from parents of babies aged between 4-12 months. Concentrated drinks are most popular among this age while allegiance switches to ready-to-drinks when they pass their first birthday.

Milupa amassed consumer Brownie points by introducing the first sugar-free herbal drink, Sugar-Free Fennel, a sector they predict rising sales for. They claim a 14.2 per cent of the drinks market with all attentions focused on the granulated division. Their only competitors in this sector, Robinsons, have now discontinued their range.

The pharmacy/drugstore sector accounts for 52.8 per cent of baby drink sales, with 31.9 per cent of these going through Boots. But sales through groceries are continuing to grow, say Robinsons.

The market itself divides into three categories:

- concentrates report an 8 per cent decline but still account for 45.9 per cent of the market. Baby Ribena leads, followed by Cow & Gate's Olvarit.
- granulated has dropped by 17 per cent to 25 per cent. It's possible that Milupa's sugar free policy has yet to pay off.
- ready-to-drink has recorded the smallest decline of 7 per cent to 29.1 per cent. Olvarit is still brand leader with Robinsons not far behind.

Drink support

Robinsons are concentrating on advertisements in baby and women's Press. The campaign centres on the low acidity in their juices.

Milupa are offering pharmacists shelf wobblers for their Sugar-Free Fennel drink.

Heinz are spending £2 million on Press and television advertising.

Cow & Gate are supporting their Toddlers Drinks by linking up with the Pre-School Playgroups Association in April, targeting 800,000 toddlers via their playgroups.



Robinson's baby fruit juice drinks come with dental symbols

A case for investigation

Nappies have always seemed to be rather an open and shut case. But this year, with the introduction of Kimberley-Clark Huggies and the launch of trainer pants, they may be worth some closer attention. Jaue Nicholls reports

At first glance you'd be forgiven for thinking that the nappy market was pretty unexciting, historically speaking. After all, there have always been babies, which means there have always been nappies.

Over the last decade or so, however, the nappy market has well and truly undergone a metamorphosis, and the signs are that this driving innovation isn't about to stop either.

Nappy manufacturers have always listened extremely carefully to their target audience.

Thus, as more and more mothers started working as well as having children, and the time pressures of modern life increased, so the rise of the disposable has been nothing short of phenomenal. From only 10 per cent of the market in 1980 to 87 per cent today, the disposable sector is now estimated to be worth an incredible £452 million — not bad for 13 years growth!

That desire to please the consumer and create the ultimate nappy experience, coupled, of course, with that all important competitive spirit and need capitalise on market share, hasn't stopped there either.

When mothers were unhappy about wet nappies irritating babies skin, the lockaway core was developed; when they explained how boys and girls wet their nappies in different fashions, so the different gender specific disposables entered the marketplace.

Today, innovation is still the key to the game. And, the 1994 buzz products look certain to be the trainer pants and the ultra thin nappies that began to hit the market at the end of last year.

With the very high profile entrance of Kimberley-Clark into the mainstream nappy arena already this year, the nappy sector seems certain to be one to watch.

A new force

With the launch of Huggies Ultrathin nappies, Kimberley Clark have put a campaign

worth some £20 million together to establish the brand.

Including national television and press advertising, as well as pre and post birth sampling, and a range promotional offers, the company is hoping to mirror the success of the nappy range in the US where Kimberley Clark state they are the leading nappy care brand.

And the company is not shy about its targets either. "We aim to be the number one nappy

improving their current nappy range with an anti-leak pant, a combination of anti-leak leg cuffs and two waist pockets, one next to the baby's tummy and one at the back, forming a "complete leakage barrier", according to the company.

The range also has a new Superfit waistband design which works with resealable tapes to allow freedom of movement, while protection.

Within the own brand



PeaDouce nappies now take up less shelf space

brand in the UK with a 30 per cent brand share within three years," says James Meyer, Kimberley Clark's European marketing director.

The nappies themselves are 50 per cent thinner than the current market leader, but even more absorbent through the use of a new super-absorbent material, say Kimberley Clark.

In addition they have better leak prevention and are designed to fit better, says the company.

The thinness of the nappies also has a knock on effect as far as display and storage is concerned, both for the consumer and the pharmacy, says Mr Meyer, with smaller packs being easier to carry, and easier to store.

Fight back

Not surprisingly, other manufacturers are not about to lie down and play dead.

Response to Procter & Gamble's Pampers Ultra Thin range, launched in October, has been favourable.

PeaDouce have been

markets AAI Pharmaceuticals are also running their Popular Cheque Book promotion on the Vantage range via local Health Authorities.

The Cheque Book is distributed to 300,000 women along with their baby record card, and allows them, says the company, to get first class nappies for the cost of a second-class stamp.

Meanwhile, changes are ahead. Swaddlers, whose new owners Disposable Soft Goods UK, will be aiming to turn this loss making operation into a success, while continuing to run both DSG and Swaddlers as separate companies.

DSG are firmly committed to the pharmacy disposable nappy market, unlike some other leading manufacturers, says Chris Rawson, sales manager.

"I have a personal belief that the major groups are intending to sell solely through the big multiples," he says. "We do not have the muscle or the product range to compete."

Continued on p16

Introducing the new improved Johnson's baby range



The new formula for increased sales

- The UK's No. 1 brand of baby toiletries is now even better with improved formulations and added natural ingredients such as soothing Camomile, gentle Almond and moisturising Glycerine.
- In 1994, an £8 million awareness campaign, including television, press, hospital usage, and sampling to 92% of mothers will increase sales of Johnson's toiletries.
- Johnson's Baby toiletries yield high cash margins; maximise your shelf space investment by stocking the brand leader.

Be sure to plan ahead to meet demand.
It's your formula for increased sales.

CLINICALLY
MILDNESS
PROVEN



Nobody babies you better than Johnson's

Continued from p14

"If we have one message to pharmacies it is that in DSG they have a manufacturer that is totally committed to the pharmacy share of disposable nappies."

DSG will also be majoring on the unisex nappies, not only because they believe that the boy and girl nappies are really just a marketing dream, but because Mr Rawson says, unisex products are the only way retailers can maximise their shelf space.

As part of this desire to work with the pharmacies, DSG will also be involving pharmacies more closely with their sampling process, as well.

"We're offering retailers the opportunity to share in this sampling process. We produce the sampling packs which the retailers can give out, thus encouraging more loyalty among customers, who having tried the product once from the pharmacy, come back again to buy it," says Mr Rawson.

When it comes to the major competition — Kimberley Clark and Procter & Gamble — DSG believe they can offer the retailers a much simpler package, which does not commit pharmacies to carrying huge stock levels or to dedicating vast expanses of valuable shelf space.

"We aim to be the champion of common sense," adds Mr

Rawson. "We're making it as simple as possible. We're not spending money on consumer advertising because nappies are such a necessity item." And that means ultimately he says that they don't have to hike their prices, or knock down pharmacy profit margins to pay for such marketing.

TRAINING PANTS

As far as training pants are concerned, the market flooded with products in the middle of last year, giving mothers ample opportunity to trial most of the brands on the market cost-effectively through "money off" promotions, among other purchasing incentives.

And, with the ever present competition for shelf space, manufacturers have had to act quickly to build a loyal market.

Kimberley Clark are claiming to be the market leaders already with their Huggies range.

However, Peaudouce, who have recently joined forces with Japanese manufacturer Uni-Charm, will be upgrading their Up & Go range during this year.

Phil Jarrold, managing director of Peaudouce, is also confident of the products' uniqueness in the eyes of the consumer.

"Research undertaken during November 1993 confirmed that

Up & Go has the best selection of size variants within the training pant market," he says. "Our strategy for this sizing reflects the pattern of sales in the market place. Children begin to toilet train at about two years old, although there will always be older children, even up to the age of 3 and a half who are still training."

Other manufacturers may also be about to enter the marketplace. DSG's Chris Rawson, for example, said that although the company had no plans at present, if it was to launch a trainer pant in the near future, it would once maximise the unisex nature of the product.

All wrapped up

Given the apparent success of training pants, it seems only a matter of time before own brand labels and others start to fight for share as well. And with the rise in competition among manufacturers, who will undoubtedly place different kinds of pressures and incentives pharmacies way, this could be an interesting time for the nappies market.

Innovation and price will be the name of the game for the consumer, but retailers may do well to look at less obvious costs such as as shelf space, stock requirements and profit opportunities.

Soothing temperatures

The Pacifier Plus from Rio '92 brings a new twist to the soothers and thermometer market.

The Pacifier Plus is a soother containing a temperature sensor to monitor baby's temperature by means of a green dot inside the glycerine-filled teat. If the dot stays green then the baby's

temperature is normal but it turns black after five or six minutes when the temperature rises above 37.8°C. The Pacifier is also acts as a standard soother and gum exerciser. It retails at £2.99 and is available from Rio '92 Environmental Products. Tel: 0706 372858.



Brila report encouraging sell through of Brita Baby, launched last July as the first water filter designed for babies. Although it is too early to say how well the filter is performing in pharmacies, initial distribution has been promising. Brita Baby can be used in babies under six months who are susceptible to impurities in tap water



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Tommee Tippee Spring Offer

Jackel are launching a host of new products under the Tommee Tippee name this Spring as well as offering pharmacists extra discount or free stock deals on character feedware.

Travel versions of the Twist 'n' Seal cup are being introduced with a leakproof 100ml tumbler and 180ml taker. Both have screw on lids and a patented spout which folds down then clicks into a space provided in the lid. They come in an assortment of colours and retail at £2.49 (beaker) and £2.99 (tumbler).

Also new are fruity fun bottles which are orange and grape shaped. Both 250ml cups have a screw-on spout lid with the spout rolled up to drink and pushed down to seal.

Another novelty is a two-way teether which can be used either way round and has a ringed handle and ridged mouthpiece. It is available in twin primary and steel packs and retails at £2.25.

And for water babies there are flat-printed armbands with on-return safety valves to ensure armbands do not deflate even if stoppers come out. They are available in two sizes, babies and toddlers up to two (£2.79) and children aged two to six (£2.99). Jackel's bonus offers are valid on most of the character ranges.

Dinosaurs an extra 5 per cent discount on the normal trade price is given if one pack of divided plates, bowls, cups or inner cups is bought. On addition, purchase of a pack of 10 tumblers and double wall teatens qualifies the pharmacist a pack of free bowls.

Orthodontic Demand

Pharmacists should be aware of the growing demand for orthodontic teats and soothers. Wyn Roberts, Nuk's UK sales director.

The reasons for this are, he believes, that childcare experts are keen for parents to understand the benefits of orthodontic teats, such as minimising excess air intake the Nuk orthodontic teat is shaped on the shape of a mother's nipple during breast feeding and recommended for when mums cannot feed in person. The teat is produced in latex and silicone and comes in two sizes: size one for babies up to 12 months and size two from 12 months.

The range comprising bottles, soothers, breast pump and feeding cup, is now being distributed in the UK by Quest Consumer Products.



Bebo Products into Pharmacy

Touted as "The first major baby care launch for ten years", Bebo from Medicare Colgate is now available in pharmacies.

The products are already used in 70 hospitals in the UK and so "they are often the first brand a mother sees," says managing director David Colgate.

The range comprises designer and plain feeding bottles which feature a special locking disc inside the screw cap which cannot fall out and become contaminated and the screw cap has finger grips for ease of use. Silicone and latex teats and orthodontic soothers are also available in blister cards of ten.

The increase in the number of working mums has led to a growth in the need for products for expressing, storing and feeding breast milk. Bebo provide a manual breast pump, mini electric breast pump, silicone nipple shields and milk storage bottles.

The range also includes breast shells made of plastic which, it is claimed, can help correct inverted nipples as well as collecting excess milk.

Further products in the range include the fitted re-usable nappy which has a waterproof nylon cover, comes in three sizes and

can be used up to 100 times; sterilising unit; safety soother; easy grip feeding bottle; wipes; bottle brushes; and nappy bags.

Bebo is available through major wholesalers and is being supported by features in the parenting and women's Press. Medicare Colgate. Tel: 021-328 3456.

Maws glowing soother

Maws are launching "Glow in the dark" soothers this month, in an attempt to boost the £8 million pacifier market.

The product is the first launch from the Maws Group since it was founded last October.

The soother has a phosphorescent shield and handle, making it easier to find in the dark. It will glow for up to 30 minutes following short exposure to natural or artificial light. It is available in a double pack of lemon and lime colours and retails at £2.65.

Pharmacists will benefit from a launch offer of one free twin pack with every dozen ordered. Advertising in parenting Press follows later in the year.

Pigeon targeting pharmacists

The recent appointment of a pharmacy sales team is reaping benefits for Pigeon as the range "becomes more visible in-store".

The company is launching the Insti Bottle which allows feeds to be made up when the family is on the move. It incorporates an insulated bottle

(suitable for any standard feeding bottle) holder with a compartment for powdered formula all in a flask like carrier with wrist strap. The bottle is filled with boiled water and placed in the holder until feed time. It retails at £7.95.

Pigeon also make Insulated Bottle Holders in single and double sizes for already made up feeds which retail at £3.99 and £5.99 respectively.



Mini Mam sampling

Mam believe that a selling opportunity exists to promote the use of soothers to expectant mums after a survey revealed that few soothers are bought before birth.

Pharmacists are well placed, say Mam, to introduce the idea of buying a soother "just in case".

To encourage the use of soothers Mam are sampling the Mini Mam soother through Bounty, the first time a soother has been sampled in this way, and in a new consumer title *Pregnancy & Birth* as a subscription offer.

Mam are also increasing their Press advertising spend this year to boost sales of the Twist 'n' Seal Drinking Cup which was voted Nursery Product of the Year by *Mother & Baby*.





Cannon fuelled by Avent

Cannon Babysafe report an overall 17 per cent growth last year, helped mainly by the company's premium Avent brand which saw a 19 per cent increase in sales.

All Avent bottles and systems are showing growth with Battery Breast Pump sales exceeding 20 per cent.

Sales of the Nipplette continue to grow and will benefit from new packaging which will be in place by mid-April. It will also be available in a new double pack (£24.50).

All products will be supported with trade advertising and on going consumer promotions.

Simpkins' The First Years range has been expanded to include the "Washables" — toys which can be washed in the dishwasher.

The range was developed following customer requests and evidence from the US Federal Health Authorities that toys were a major factor in the transmission of germs, say the company.

Each one of the 15 items in the range have been fully sealed so none of the decorations will come loose. The toys retail from £1.59.

Tomy special

Tomy Nursery began their move into pharmacy last year with the launch of their Safety 1st range. This is still available as a special starter pack for pharmacies, complete with stand.

The brand is being supported with advertising in the parental Press.

Numark's new look bottles

Numark is relaunching its bottle feeding line with a range of nine products.

These include decorated designer bottles in 125ml (£1.49) and 250ml (£1.69) with silicone teats and a plain 250ml bottle with a latex teat (£1.19). The teats are available in silicone and latex twin packs with both fast and medium flow (silicone £0.99, latex £0.75).

There is also a silicone shaped teat which mimics the natural nipple shape (£0.49) and a soother (£0.65).

Until mid-March, retailers are being offered 10 per cent off normal trade prices, boosted to 20 per cent if they order at least one outer of each of the new lines.



Wisdom Baby is a new baby toothbrush for use in 0-3 year olds. It has a long handle for maximum grip, a narrow neck and comes in a range of colours with a Happy Hippo design. It retails at £1.39



Weleda's recently launched Body Therapy range includes a baby line made with essential oils and extracts of calendula and camomile. The range comprises calendula baby moisturiser, nappy change cream, baby soap, baby oil and baby powder. There is also a triple pack available incorporating 10ml samples of the moisturiser, nappy cream and oil. The range is being promoted in the parental Press and through a direct mail campaign. There will also be a Summer promotion offering a free 75g pack of powder with every purchase of nappy cream, moisturiser or oil.



Roche Consumer Products claim that Punch & Judy Toothpaste is market leader in the pharmacy and drugstore sector with a 30 per cent share of the children's toothpaste market. However, the market has dropped 6.5 per cent in volume and 2.5 per cent in value



The Benylin Children's range accounts for one third of the total children's cough market, according to makers Warner-Lambert Healthcare. Benylin Sugar-free for Children has also become one of the top selling children's cough medicines in terms of cash rate of sale, they claim

The market for specialist baby creams has performed well during the past year, rising by 10 per cent (FSA).

Dentinox Teething Gel's new
GSL status is expected to



With the total baby products market increasing by only 2 per cent last year, the toiletries and baby wipes sectors have bucked the trend with increases of 9 per cent and 10 per cent respectively. Babywipes continue to be the

Toiletries are an important sector for pharmacies and their mild formulations are being used increasingly by adults, generating even more sales.

J&J have just reformulated their range, adding soothing ingredients such as camomile, almond extract and glycerine, to make it more suitable for sensitive skin. The brand has also been repackaged and is being supported by an £8 million television and Press campaign.

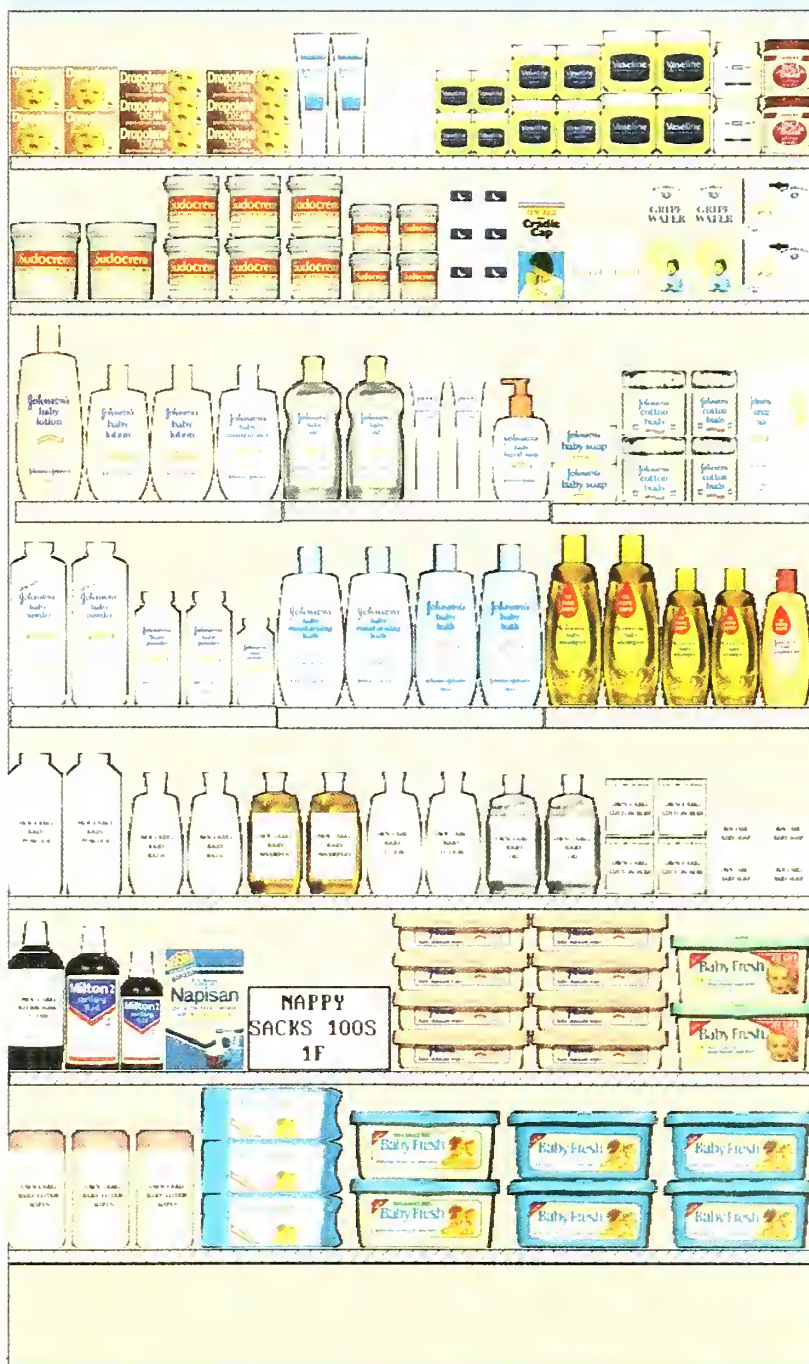
Unichem have also reformulated and relaunched their range to include flip-top caps. They have now made their baby wipes range alcohol and lanolin-free.

Power Health has introduced Baby Naturals — a range of hypo-allergenic, colour-free, biodegradable baby toiletries.

The products contain camomile to soothe and calm skin and aloe vera to moisturise. The range comprises powder, shampoo, bubble bath, lotion, creams, wipes and oil.



ixlyx sales increased 56 per cent last year, say manufacturers Intercare, boosted by the flu epidemic in November and December. This makes Tixlyx the brand leader in the children's coughs and colds sector, they claim. Advertising will continue in women's magazines until April while Tixlyx leaflets and booklets are being made available to GPs.



Johnson & Johnson have developed a planogram to improve baby toiletries sales. The company advises positioning toiletries at eye level to encourage impulse sales from adults while nappy creams and wipes should be at the top of fixtures as they are unlikely to be impulse buys. The J&J brand should be blocked as the company claim that it will trigger awareness of the whole sector



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March 1994

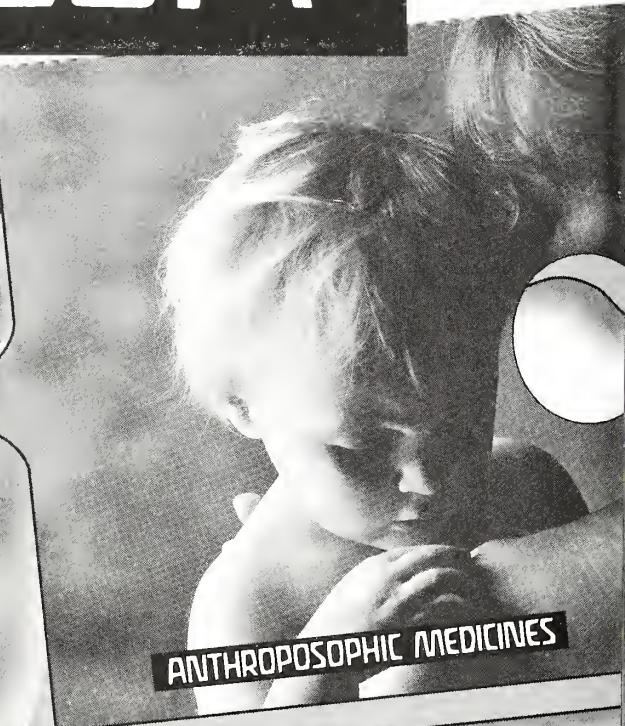
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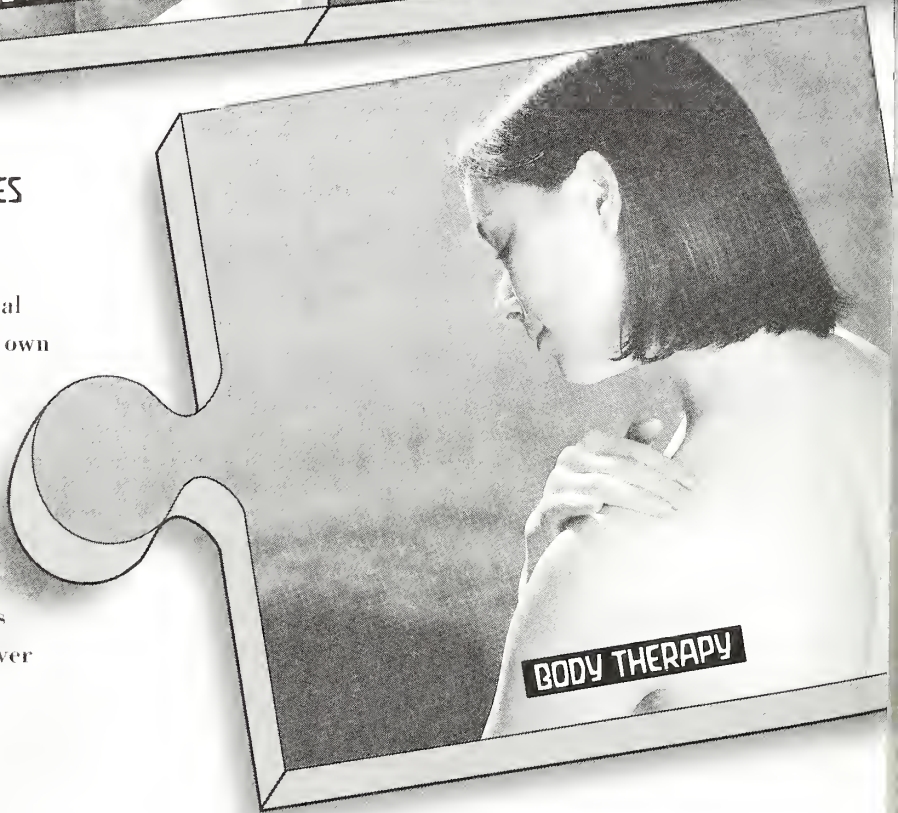
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Prescribing food

Growing interest in the role of diet in preventing and treating disease has led to demands for nutritional therapy to be available on the NHS.

Adrienne de Mont looks at some recent developments.



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Sluggishness, acne, body odour problems, fatigue, headache and fluid retention may be associated with poor elimination of waste matter via the liver, gallbladder and intestines.

Most people consult nutritional therapists as a last resort, having obtained no satisfactory help from other sources. Treatment is tailored to individual patients, who fill in a questionnaire asking about their medical history, symptoms, diet and lifestyle.

If she suspects an allergy, Ms Lazarides will put them on an exclusion diet to identify possible culprits such as caffeine, dairy products or wheat. She does not always use supplements — nutritional education and dietary adjustments may be all that is needed. Megadose therapy is not used, other than for vitamin C.

The general public tends to understand nutrition in terms of food rather than components of food such as fats, so the society has developed guidelines in which foods are divided into seven "desirable" groups — fruit, vegetables, salads, fish and chicken, pulses, nuts and seeds, and wholegrains.

Clients are advised to eat a variety of foods from each of these groups every day and to cook them without adding fat. Their long-term aim is to follow these guidelines 90 per cent of the time and to eat what they please the rest of the time, unless their treatment forbids it.

Ms Lazarides thinks that discussing nutrition in terms of foods helps avoid popular misconceptions such as the need to eat bran products to obtain adequate fibre or calcium tablets to obtain more calcium. It is more helpful to say "You are not eating

Continued on p4

can offer no satisfactory long-term remedy. Examples include chronic fatigue, skin problems, headaches, poor resistance to infection, female hormonal problems, and irritable bowel syndrome.

As a practising independent nutritional therapist she has found that 85 per cent of migraine sufferers report a definite lasting benefit if they keep to a hypo-allergenic diet.

"The NHS could save substantial amounts of money in drugs alone if nutritional therapy became part of mainstream medical practice," she claims.

The SPNT wants to see nutritional therapy available on the NHS, rather than regarded at best as something that is slightly weird or "alternative," and at worst "unproven nonsense." As well as easing the pressure on budgets it would also encourage a greater awareness of the importance of diet in preventive medicine.

The society seems to have growing support in Parliament. Three-quarters of the 111 MPs questioned in a recent survey thought that NHS patients should have greater access to nutritional therapists and 81 per cent thought GPs should make available specialist advice on dietary supplements.

Many experts believe that nutritional deficiency rarely exists in Britain and most studies on vitamin and

mineral intakes have found a satisfactory average intake in the population as a whole. But Ms Lazarides says little information is available on the numbers whose intakes would be deemed severely inadequate.

The official recommended daily amounts, now replaced by dietary reference values, are theoretical figures referring to healthy groups of people rather than individuals, she argues. They take no account of additional needs due to infection, gastro-intestinal disorders, metabolic abnormalities and genetic individuality.

Nutritional therapy

Nutritional therapists use three diagnostic approaches when treating patients. They look first for food or environmental allergy or intolerance as well as nutritional deficiencies due to poor diet, special needs or malabsorption.

They also look for toxic overload of heavy metals or chemicals in the environment, and reduced ability to eliminate these toxic substances. Some patients fail to respond to dietary improvement and supplements until this potential toxic overload has been reduced. A diet high in calcium and selenium, for example, can compete with lead and mercury for absorption and uptake.

The Society for the Promotion of Nutritional Therapy sees almost all disease as being influenced by nutrition — either directly, as in cardiovascular disease, or indirectly.

"Food is the raw material of every cell in the human body, and both logic and common sense dictate that an individual's nutritional status must be reflected in the quality and efficiency of cells in the endocrine, immune, cardiovascular, reproductive and musculoskeletal systems," the SPNT says in its response to the Health of the Nation report.

The high incidence of cardiovascular disease is just one manifestation of faulty nutrition in the UK, and SPNT believes the report should have recommended many more nutritional targets than just reducing fat intake. The society thinks it is absurd to demand scientific evidence before recommending specific intakes of wholemeal bread, fruit, vegetables and pulses. These demands "are likely to be made mainly by those with a vested interest in the nutrient poor sector of the food industry," says SPNT.

Linda Lazarides, the society's director, believes that nutritional therapy can be an inexpensive and effective treatment for many chronic, minor health problems for which conventional treatments

Continued from p3

enough wholegrains, pulses and vegetables" than "You are not eating enough fibre."

At present there are about 400 nutritional therapists practising in the UK. Although there is no State qualification or registration, training takes two years part-time or three months full-time, leading to a diploma. SPNT provides further education and is aiming to standardise training and develop a degree course.

There is a directory of practising members who have to provide details of their qualifications and professional indemnity insurance; ultimately SPNT is working towards statutory recognition and registration.

The society is also developing guidelines for good practice and has a complaints procedure should any problems occur. One of the guidelines encourages nutritional therapists to keep in continued contact with the patient's doctor, as do orthodox dietitians.

Orthodox dietitians, too, are tending to increase their health promotion role among the general population. Not all are sceptical about SPNT and several have joined, as have orthodox medical practitioners.

Campaigning

The SPNT would like to see health warnings on advertisements for nutrient-poor foods, and better nutrition education in schools.

"Many people have received no nutrition education other than what they see on television," the society says.

Another priority would be to set minimum nutritional standards for school meals and catering in hospitals and other institutions.

Although the SPNT has no commercial connections with any dietary supplement manufacturers, it ran a successful "Save our supplements" campaign from December 1991 to April 1993 when the European Commission threatened to restrict the availability of these products. Support from MPs and consumers alike eventually led to the Directive being abandoned.

Now, by trying to improve the understanding of nutrition and its importance in medicine, the SPNT hopes to bring about "the most profound effect on healthcare in Britain."

SPNT, First Floor, The Enterprise Centre, Station Parade, Eastbourne BN21 1BE.

Supplemented sales

The supplements market is now big business with the increasing pressure on people to improve their lifestyle and general health

The vitamins, minerals and dietary supplements market grew nearly 10 per cent last year to £238 million.

New products, increased advertising and media publicity — both good and bad — have increased consumer awareness which has in turn been fuelled by retailers devoting more shelf space to supplements as product ranges increase. And development of the market through grocers has led to increased self selection with possible repeat purchases elsewhere.

These factors, combined with the public's growing interest in healthier lifestyles, have kept sales buoyant.

The market has also progressed beyond the use of supplements to make up for nutritional deficiencies towards supplementation for specific, protective benefits.

According to AGB Superpanel figures, fish oils are the largest sector (£66m), followed by multivitamins (£62m). Single vitamins (worth £35m) have shown the highest growth (18 per cent) followed by garlic products which have grown 16 per cent to £21m.

The market is still dominated by pharmacies who take just over half the market, with Boots accounting for 35 per cent. Although the total pharmacy sector increased slightly last year, it was as a result of growth through Boots rather than independents.

According to AGB Superpanel, grocers are striding ahead with a 28 per cent increase in sales giving them just under a third of the market. Manufacturers attribute this increase to the fact that vitamins and food supplements have become a regular purchase and predict that grocers will gain in importance with the demand for mass market convenience.

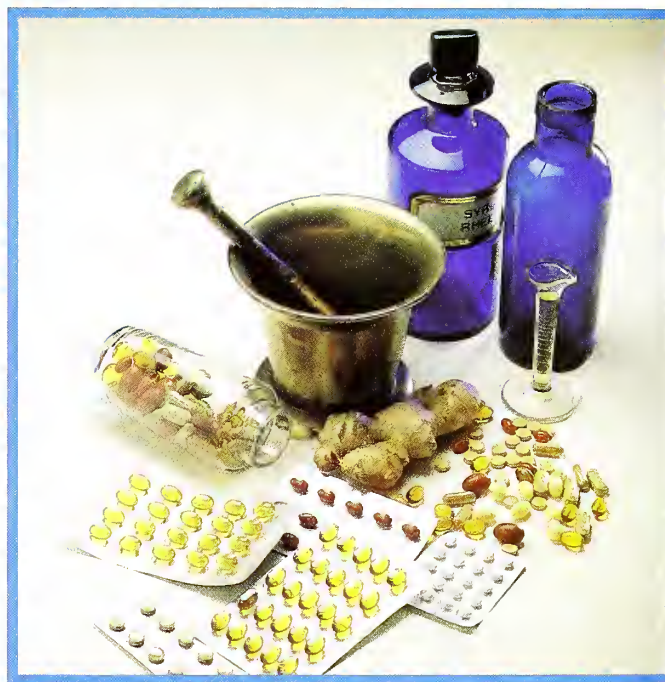
Drugstores, with a 14 per cent share, have shown a slight decline in sales in spite of price promotion. Sales through healthfood stores have shown a similar increase to grocers, although they are still the smallest sector with 12 per cent of the total.

Peter Durose, group

product manager at Roche Consumer Health, believes that specialist products are helping to attract users outside the core group, which is generally recognised as

for, as these consumers age, they are looking to improve their healthstyle by opting for health supplements with proven benefits."

Gareth Zeal, FSC nutritional



women aged over 35.

Sanatogen Vegetarian, for example, is aimed at a specific, growing group of people while Sanatogen Teen was introduced to appeal to young girls.

He suggests that independent pharmacists should not underestimate the help they can give confused shoppers who are often uncertain about a particular purchase, especially if it represents a new category such as anti-oxidants.

VMS products should be merchandised in an open and accessible area of the store as consumers like to spend time investigating the different products available. This area should be close to the pharmacy itself so that advice can be easily given.

Another key to improving sales performance, says Mr Durose, is to ensure that the VMS display features key advertised brands.

Seven Seas Healthcare's marketing director, Tom Hardman, comments: "For increased sales potential, stockists should look to women aged from 45 upwards

consultant, says: "It is difficult for people to judge their vitamin and mineral intake on a daily basis. However, the British consumption of fruit and vegetables is on average only half that recommended (400g of fruit and vegetables daily). It is for this reason that food supplements have become so popular among those people who know the importance of healthy diet but for one reason or another can't manage a well-balanced diet all the time."

Ferrosan Healthcare say there has been continuing growth in own label products especially in supermarkets where garlic and evening primrose oil are among the most popular lines. Because of this competitive pricing, manufacturers will have to offer value added promotions to maintain their VMS share through pharmacies, so Ferrosan are running price cuts on four of the best-selling Healthcrafts products.

Vitamins

The market for vitamin C has grown 50 per cent in the past year, says Louise Walters,



Sanatogen aims for a growing sector

brand manager for Redoxon. As market leader, Redoxon vitamin C is keeping pace with that growth.

The reasons for its popularity has much to do with advertising and in-store support, together with spin-offs from the advertising and publicity given to anti-oxidants.

It is also the most commonly known vitamin, she says. When, in a recent survey, consumers were asked to name a vitamin 98 per cent said vitamin C.

Anti-oxidants will become one of the major growth sectors, Ms Walters predicts. Favourable results of clinical trials have a noticeable impact on sales and more trial results are expected later this year or early 1995.

Fish oils

Fish oils performed particularly well last year growing 11 per cent to £66m. Cod liver oil retains its position as the UK's biggest selling health supplement, according to Seven Seas whose pure cod liver oil is clear brand leader.

Their research shows that two thirds of users take it to relieve joint pains, stiffness and arthritis symptoms while the remainder take it to maintain general health.

Sanatogen's cod liver oil products have outpaced the market with a 55 per cent growth in value, says Peter Durose: "Newer combinations such as cod liver oil with multivitamins are particularly popular because consumers are

Profile of the big spenders

Women are the big spenders in this market and account for over 70 per cent of purchases and almost all purchases of evening primrose oil.

According to AAH Pharmaceuticals' retail development manager Darren Kirton, the typical female purchaser is aged anywhere between 35 and 65. She is likely to have money and spend more than the average amount of time on leisure activities.

"The health and beauty pages in the leading women's magazines are her favourite reading material and are viewed as a great source of interest and information," he explains. "And this is where we believe the independent pharmacist comes in. By staying in touch with the latest information and even displaying copies of articles from magazines such as *She*, *Vogue*, *Bella*, *Prima* and *Woman* — to name just a few — the independent can help establish his or her pharmacy as the ideal place for such purchasers to buy their regular supply of vitamins and mineral supplements."

The reason why women take these products varies from wanting to improve their overall health and fitness, to relieving problems such as premenstrual tension, water retention or skin problems. A vast number want to relieve stress, a major cause of which is the menopause. "At the younger end of the scale, the typical health supplement buyer is also female but one with a much wider repertoire of vitamins and minerals which she uses to try to prolong vitality and delay the onset of age-associated problems," he says.

"As this particular buyer gets older and her supplement needs become more specific, she will simply increase her intake of those vitamins and minerals she has come to rely on over the years. She certainly tends to remain a loyal and long-term customer who is willing to pay more for what she sees as quality benefits.

"This type of buyer, however, is not an easy person to convince about the benefits of new or alternative health supplements. She needs to be convinced that the products on offer have full support from medical science. This again is an area where clever use of product leaflets, display material and articles from magazines, medical journals and other sources of information come into their own, as does sound professional advice from the pharmacist or his or her staff."

Another way the independent can help increase sales of vitamins and minerals while attracting long-term customers is to provide a mix of products.

According to AAH Pharmaceuticals, this mix should include the brand leaders and own brand varieties of the more established supplements such as cod liver oil and evening primrose oil. Own brands appeal to buyers who are more budget conscious or who believe they are getting quality at the right price.

"On a more cautious note, however, pharmacists need to be careful they don't display too many products," warns Darren Kirton. "In doing so they risk the potential purchaser spending too much time trying to differentiate between brands and ending up buying nothing.

"The way products are displayed and their position within the front-of-shop area is another important factor. Because supplements are 'non-distress' items, they need to be displayed in a location which allows customers self-selection. Many potential buyers like to browse and read the various labels before deciding on a final purchase."

The products should be displayed in a best-selling area, for example, next to the counter medicines where customers can self-select but easily ask for assistance if required.



Cantassium have just launched Smoke Screen, an anti-oxidant aimed at people exposed to a polluted environment such as smoke or exhaust fumes. It contains vitamins A, C and E and comes in a click dispenser of 90 tablets (£3.95)

buying two formulations for the price of one — with added convenience."

Garlic products

Tim Horne, Seven Seas' group products manager, says the 15 per cent growth in the garlic market last year is due to continuing coverage of its health benefits in the consumer media, plus heavy-weight advertising by Hofels.

Research continues to focus

on heart health but a survey of users last year (RSCG) found the main reason for taking garlic supplement was for general health maintenance.

Evening primrose

Evening primrose oil and other GLA products grew by nearly 9 per cent in the past year to be worth £35m. Sales are split almost equally between branded and own label products.

Fit for the future?

Children's poor eating habits may increase the risk of them suffering from heart disease, osteoporosis, strokes and cancer in later life.

In the short term, a poor diet can lead to anaemia which can affect physical and academic performance. If continued into motherhood it may increase the risks of giving birth to underweight babies.

Dr Michael Nelson, lecturer in nutrition, Kings College, London, told a National Dairy Council conference that research showed children's intakes of calcium, iron and dietary fibre were often below recommended levels and that too much energy was taken in the form of fat and sugar.

Many children were eating too much and fat children were more likely to grow into fat adults, he said. Studies had shown that, even in children as young as five and six, systolic blood pressure was positively related to fatness and inversely related to fitness. Fitness at age 36 was clearly related to fitness at age 13.

Children who were overweight at 13 to 18 years of age were more likely to die from heart disease and cancer as adults, although part of the excess mortality could be related to other risk factors such as smoking which persisted throughout life.

Most studies of children had shown that the average level of energy obtained from fat in the diet was above the recommended 35 per cent. As early as age ten, fat intakes were associated with raised serum cholesterol so children showed the same relationship between diet and cardiovascular disease risk factors as adults, Dr Nelson said.

Sugar intakes generally seemed to be above those recommended but the main risk appeared to be from dental caries rather than the "empty calories" resulting in a reduced vitamin intake. Some diets high in sugar were also high in vitamin C because of a high consumption of fruit juice and fortified squashes.

The nutrient most likely to be in short supply was iron, said Dr Nelson, particularly in young toddlers and adolescent girls. Primary schoolchildren did not, on the whole, appear

A recent conference, "Children in focus," looked at how today's burger and TV lifestyles could affect children's health in later life.



to be iron deficient.

A study of adolescent girls showed that those with mild anaemia had higher heart rates after exercise tests.

"But the health and development consequences of these small but significant differences in heart rate are not known," Dr Nelson said.

He and his colleagues are investigating whether anaemic girls are habitually less active to compensate for the lower oxygen-carrying capacity of the blood. If so, this could be important in the long-term.

Physical activity was also important in the development of peak bone mass and in preventing osteoporosis in later life.

If anaemia persisted into the reproductive years there was

an increased risk of low birthweight and pre-term delivery, he added. This in turn was linked with increased morbidity in childhood and, possibly, hypertension in later life.

"We need to develop simple, effective and preferably non-invasive ways of identifying children who may be iron deficient," the speaker suggested. He did not recommend widespread supplementation because most children had an adequate iron status and overdoing it could be hazardous.

Dr Nelson went on to say that the picture for calcium was less clear. Many adolescents had below the recommended intake and, although there were no

obvious short-term effects, this could influence bone formation and the development of osteoporosis. But some researchers had concluded that physical activity could be more important and he thought the current estimates of calcium requirement should be revised in conjunction with more clearly defined requirements for exercise.

Turning to folic acid, he said there was a widespread deficiency among British children although there was no evidence of clinical effects. But if this persisted into adult life, girls with low folic acid intake in adolescence were more likely to give birth to babies with neural tube defects.

Liver and dark green leafy vegetables were important sources of folic acid and these foods were eaten least often by children in social classes IV and V, the groups in which neural tube defects were most common.

There was no clear evidence yet of any long-term protective effects from anti-oxidants taken in early life, Dr Nelson continued. Although studies in adults suggested that diets rich in fruit and vegetables might protect against heart disease and cancer, it was not known how these diseases related to tissue damage that might have occurred in childhood.

Many children's diets were lacking in fibre and, although the benefits or otherwise of increasing dietary fibre in childhood were unclear, it was probably worthwhile encouraging children to get into eating habits which would be beneficial in adult life.

Too sedentary?

Children's fitness seems to be no worse than in previous decades, even though they are more likely to sit glued in front of the television or computer games.

Dr Ken Fox, co-director of Exeter University's Physical Education Association Research Centre, told the conference that the greatest health hazard from these sedentary lifestyles seemed to be the risk of getting fat.

There was convincing evidence that adults who were fitter and more active were much less likely to suffer from heart disease,

diabetes and cancer. Physical activity could also improve psychological wellbeing in many ways, including mood enhancement, reduced stress and improved body image and self-esteem.

As a result several nations, including the UK, had included physical activity promotion targets in their health policies.

But, said Dr Fox, the benefits of exercise for children were less clear-cut. Experts had concluded that there was no evidence that children's aerobic fitness levels were any different from previous generations.

The relationship between exercise, fitness and health in children was complex. Aerobic fitness seemed to be determined largely by genetics, with children who carried the genes of athletic parents scoring better.

Sexual maturity also played a part so that boys who matured earlier performed best because of their increased muscle bulk, while early maturing girls tended to score worst because they had a greater proportion of body fat.

Although aerobic fitness did not seem to be a useful indicator of children's health, there was a need to encourage children to take more exercise or its possible benefit in later life. There was plenty of evidence that teenagers in particular did not take part in enough vigorous activity that was likely to improve heart health.

An international consensus conference in San Diego last year issued guidelines on the amount of exercise individuals needed to maintain good health.

They recommended that all adolescents should be physically active daily or early every day and should take part in activities requiring moderate to vigorous exercise for at least 30 minutes three or more times a week.

The rationale behind the first recommendation was that weight-bearing activity reduced the risk of obesity and enhanced bone development. The second recommendation was for psychological benefits, improvements in blood lipid profile and aerobic fitness.

"Physical activity becomes more salient to health as we grow older and perhaps the most important concern would be to educate our children about this and provide opportunities for a lifetime of activity involvement as adults," Dr Fox concluded.

Supplements made simpler

The tremendous growth in the supplements market over the past decade has led to a

bewildering array of products and confusion among consumers as to what they ought to be taking, says Pradip Pattni, managing director, Ideal Health plc.

Supplements on the market vary so widely in potency that there is a risk of too much of one nutrient upsetting the balance of others, as well as a risk of overdosing on those which should be taken only in moderation, he adds.

This has led to some disillusionment among consumers which, combined with the recession, means the market has not grown in recent years as much as it might have done, he says. Over the past year the market value has been fairly static, although unit sales have increased because of growth in the cheaper own label brands.

Mr Pattni, who set up Vitalia Ltd in the UK ten years ago, set up Ideal Health plc to market a range of dietary supplements for specific conditions and groups of people. He believes the "Specially for" range will help to give the market a much needed boost.

"The range has been formulated logically and scientifically to meet individual needs. The nutrients are balanced so that in solving one problem they

don't create another," he says. Most of the first 15 products contain a baseline amount of the main vitamins and minerals considered necessary for a healthy diet, as well as those needed by particular individuals.

Specially for pregnancy, for example, contains folic acid as well as other nutrients believed to be needed prior to conception, during pregnancy and in the first few months after the birth.

Other products provide extra iron or calcium, while the supplement for "maintaining a healthy heart" contains garlic and fish oils as well as the basic nutrients.

None of the products is licensed as a medicine.

More products are expected in April. They are manufactured in the UK by R.P. Scherer and have been formulated in consultation with scientists at King's College, London.

As with the Vitalia range, the packs use symbols to indicate dosage, suitability and cautions. Promotion to consumers will include reader offers in women's magazines.

"Specially for" should bring people into this sector who haven't been buying



supplements before," says Mr Pattni. "We're talking to Joe Public now, not just the vitamin freaks."

Government pressure to encourage people to take more care of their own health will also help to expand the market, he feels.

Helfex 94

Retailers will have the chance to update themselves further on dietary supplements, health foods and fitness products at Helfex, to be held at Wembley Exhibition Centre on April 10-11.

Opening hours on the Sunday will be 9.30am-5pm and on the Monday 10am-4pm. There will be competitions to enter and a professional Childsplay creche for children aged two to nine. A courtesy bus will run from the local station.

For Helfex visitors who fancy a weekend in London, there is a special package of bed and breakfast for two nights, a Saturday night West End theatre ticket per person and a £10 meal voucher per person for those sharing a twin or double room (£99 per person for three-star, £120 for four-star hotels). Details of the package are available from Baxhor Travel on 081-903 8531.

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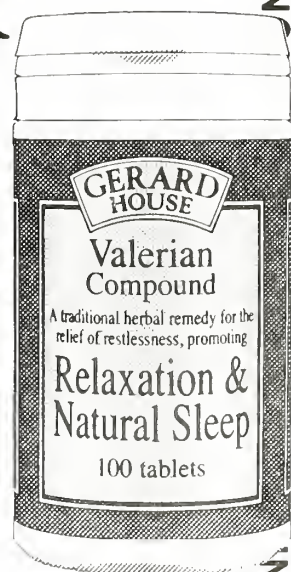
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Starflower oil - a richer source of GLA

Demand for Roche Starflower Oil is set to gather pace with the launch this month of a television advertising campaign by manufacturers, Roche Consumer Health

Roche Starflower Oil is the fastest growing supplement in the GLA (Gamma Linolenic Acid) sector and the number two brand. Its appeal comes from the fact that it contains more than twice the concentration of GLA than evening primrose oil, making it a highly cost-effective choice.

Combine this with increasing awareness among consumers of the health benefits of GLA, and it's easy to see why Roche are predicting the best year yet for their Starflower Oil brand.

Roche's research has shown that the seeds of the starflower contain 23 per cent pure GLA, compared with an average of 7.9 per cent GLA found in the seeds used for evening primrose oil. This means that one 250mg capsule of starflower oil contains more GLA than 500mg of EPO, so some customers can take only one capsule a day, rather than two, which saves them money and is more convenient.

What's more, Roche are

unique in growing their very own variety of starflower, so that they can control the whole production process of the oil and ensure its capsules are of the finest quality.

Increased interest in starflower oil has inevitably brought new questions from customers about its origins and uses, so here is a guide to help you help your customers.

Why use starflower oil?

Starflower oil contains GLA, which is identical to a substance produced by the human body to help maintain hormone balance and a variety of skin and body functions.

To make GLA, the body needs a diet rich in essential fatty acids (EFAs), which are found in green vegetables, seeds, pulses and vegetable oils. EFAs contain small amounts of linoleic acid, which has no biological activity itself, but which is converted by the body to GLA.



GLA plays a vital role in helping to maintain our levels of prostaglandins, which are hormone-like substances that are essential to our well being. GLA is converted by the body to prostaglandin E1.

Prostaglandins last for only a few seconds in the body, before they are destroyed, so a constant supply of GLA is required to replenish levels.

The reason why people may need a GLA supplement is that sometimes the body's natural process cannot produce enough of it, for example, when our diet is lacking in EFAs. Other barriers to conversion include a diet with too many fatty foods, smoking, ageing, stress, alcohol and an upset hormone balance.

Roche Starflower Oil Capsules provide a natural source of GLA

which will by-pass the EFA deficiency. They are easy to swallow, and are free from artificial flavours, colourings and preservatives. Starflower oil is particularly popular with women, because of its ability to help maintain hormone balance.

How much should customers take?

There is no set amount as to how many capsules of starflower oil people may wish to take per day. Everyone has their own individual requirement, according to their age and lifestyle, etc, so to help people decide, Roche Starflower Oil Capsules in-pack leaflet provides guidance.

New 500mg capsule

Following extensive consumer research, Roche have introduced a new 500mg Starflower Oil Capsule which will make it even more convenient and cost effective to take. Louise Walters, product manager, commented: "Our survey revealed that there is great demand for a 500mg dosage capsule from people who prefer a higher daily GLA intake. Previously these users had to take a large number of capsules, but now they can benefit from starflower oil's high GLA concentration, and take fewer, smaller capsules."

The range

Roche Starflower Oil products are now available in improved packs, which explain dosage in a clear, concise way.

Sizes are:

- 30 pack: 250mg capsules £3.89
- 60 pack: 250mg capsules £6.99

These are ideal for helping to maintain a good level of general well being and are especially suitable for first-time users.

- 30 pack: 500mg capsules £5.99
- 60 pack: 500mg capsules £8.99





These may be preferred by people who prefer a higher intake of GLA, either daily or prior to their monthly cycle.

Reaching the customer

Starflower Oil has been given extensive advertising support by Roche. Last year, the company spent over £750,000 on advertising and building awareness of starflower oil's benefits. You may have seen the ads in women's magazines and national newspapers. In September 1993, Roche Starflower Oil achieved an 8.5 per cent market share, overtaking established brands of EPO and becoming third most popular branded GLA supplement, in a sector which is one of the fastest-growing in the total health supplements market (GLA supplements is worth £31 million*).

This year, Roche continue to strongly support their Starflower Oil Capsules brand and have already run a very successful high-profile colour press campaign, flagging the new 500mg capsules. Roche Starflower Oil was also advertised on television for the first time in February, reaching consumers in the London ITV region. Further television advertising will follow, to highlight the fact that just two capsules of Roche Starflower Oil provide the equivalent average amount of pure GLA as five capsules of EPO, so fewer capsules are needed.

According to Louise Walters: "We expect that the strong proposition made by the television and Press campaigns will encourage even more

people to try Starflower Oil and discover its many benefits. The company has put an enormous amount of resources into researching, growing and producing Starflower Oil and it is certainly a marketplace that is set to expand even more in the future."

* Source: AGB Superpanel, all outlets.

A quality product

Roche are the only company in the UK to grow their own variety of borage (starflower) seed and to control the whole process of Starflower Oil production. Therefore, they can assure consumers that the capsules are of the finest quality. Here are some of the facts about the production of Roche Starflower Oil Capsules:

- The Starflower (*Borago officinalis* is its botanical name) is an attractive purple-flowering plant which is highly valued for its seed. This seed is used to produce starflower oil, which is rich in GLA.

- In 1987, Roche funded research and a seed breeding programme in the UK, which has since developed "Tyerman", a starflower seed variety which gives a higher yield and improved performance when grown in the UK than other varieties. Roche now produce most of their starflower seed in the UK and at specialist plant nurseries in New Zealand.

- Stockseed (the seed which farmers actually plant), produced from the breeding programme is inspected and then given to Roche farmers for crop production. All seed produced from the breeding

programme and commercial production is dedicated to use by Roche. In this way, production is controlled, no unauthorised chemical applications can be made and crop development and harvesting can be supervised to ensure a consistently high-quality seed supply.

- Once the seeds are harvested, they are cleaned and dried and samples submitted for quality checks by the Roche Lipid Technologies Division. The seed lots are then sent to extraction facilities, where the oil is extracted under contract to Roche.

- The oil is then sent for final processing at Roche's state-of-the-art refinery in Heanor, Derbyshire. The oil has to be refined to ensure that it is totally safe for human consumption.

- Each batch of finished product is subjected to 20 individual analyses as part of quality control by Roche.

- For further information contact Roche Consumer Health on 0707 366000.



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STRESS 	ALCOHOL 	UPSET HORMONES

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TO
GLA

STARFLOWER OIL
BYPASSES THE
BLOCKAGE IN THE
CHAIN

PROSTAGLANDINS

Oil wars

C&D reports on the latest state of play in the dispute over evening primrose and borage oils

Little could Scotia Pharmaceuticals have known what a hornet's nest they were uncovering when they held a Press briefing in January to "explode the myths and hype surrounding sources of GLA."

Their accusation that some evening primrose oils and borage oils were making unjustified claims and might even be dangerous was greeted with a storm of protest.

Other companies were quick to defend their products with Press releases which were immediately counteracted by further statements from Scotia — and the controversy continues.

Scotia, who have pioneered the development of supplements containing evening primrose oil, were piqued that other manufacturers were cashing in on this lucrative market without investing in the amount of research put behind Efamol.

Dr David Horrobin, Scotia's chief executive, pointed out that Efamol had been thoroughly tested as safe, effective and stable.

"Consumers have a right to expect that all manufacturers of GLA products should be able to produce the same information with regard to their own oils," he said. It was unreasonable for other manufacturers to extrapolate data on GLA to their products when it had been obtained from work on Efamol: blackcurrant oil, borage oil

and refined primrose oils were totally different chemically.

"One cannot prove that car X is safe by producing an MOT certificate for car Y! Yet this flawed logic appears to be precisely what some manufacturers of GLA products expect of their customers."

One of the most controversial aspects of Dr Horrobin's talk was an independent research finding that borage oil in high doses could increase thromboxane levels and lead to platelet aggregation. He also warned that "impure" primrose oils from China needed refining — a process which made them less stable, leading to the production of harmful peroxides.

In rushing to the defence of their products, other companies accused Scotia of being concerned that the success of borage oil was damaging sales of evening primrose oil products. Borage oil is a richer source of GLA than evening primrose oil — 25 per cent compared with 8-10 per cent by weight — enabling consumers to take fewer, smaller capsules to obtain the same amount of GLA.

Roche Nicholas, Seven Seas and Healthlife referred to the rigorous quality control and purity testing their products had to undergo, while Roche countered the claims that borage oil increased the risk of thrombosis by pointing out that the trial quoted involved only six people and used unrealistically high doses.



Scotia hit back by saying this was still cause for concern. Drugs were often withdrawn if they caused adverse effects in 1 per cent of people (compared with 100 per cent of six) and the fact that high doses were used (about 20-40 times more than recommended) was irrelevant because some people would take high doses in the belief that natural products were safe.

A general principle of toxicology was that effects seen at high doses over a short time in small populations were likely to occur in some people at lower doses over

long periods.

No adverse effects, other than the occasional loose stool, were seen when Efamol was given for a year to 16 people in a dose of 1g per kg daily, said Dr Horrobin. This was over three times higher than the dose of borage oil shown to produce an adverse effect in only six weeks.

Another of Scotia's complaints was that the dose of borage oil claimed to be effective is 250-750mg per day and there should be clear supporting evidence for this. Although borage oil contains more than twice as much GLA than primrose oil there was no



Windsor Healthcare are planning a pharmacy campaign for Pharmaton this Spring and Summer. They are also hoping to run another poster campaign in the Autumn. Last Winter a £250,000 poster campaign ran in the London Underground and at above ground sites where people spend long periods in traffic queues; the aim was to target professional men and women living busy, active lives

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roof that it was more than twice as effective medically or biologically, said Dr Horrobin. He quoted an independent study in mice which showed that evening primrose oil raised the levels of the desirable prostaglandins PGE1 and PGE2 (prostacyclin) whereas the net effect of borage oil was to reduce them. But Healthlife commented at one study — at the University of California, San Francisco — found that both evening primrose oil and borage oil lowered blood pressure.

"The finding that, weight for weight, the GLA from evening primrose oil was more potent in this respect does not invalidate borage oil as a valuable source of GLA," the company said.

Roche commented that 18 trials have been carried out on either Starflower oil in humans. Clinical trials are underway looking at higher dosages than the standard 240-320mg GLA per day. One recent placebo-controlled high-dose trial suggested that 1.4g daily GLA in the form of borage oil might be useful in rheumatoid arthritis. The trial involved 27 patients over six months (Dr L. J. Leventhal and colleagues, *Annals of Internal Medicine* 1993; 9:867-873).

With faxes winging their way from public relations consultants to journalists, and the Efamol information line having a record week after reports appeared in the Press, seems that British Telecom have probably benefited most from the controversy.

Pharmacists and consumers may be left feeling bemused, though Scotia insist that all they did was lay down a simple challenge to manufacturers: "Prove that our own product is safe and effective by doing tests on our own product."

Most unlicensed

The whole affair again highlights the problems that can occur when claims are made for supplements which are not licensed as medicines. The only licensed evening primrose oil products are Rogam for atopic eczema and Efamast for breast pain, both from Scotia.

The Proprietary Association of Great Britain's guidance on advertising regards the claim at evening primrose oil treats eczema, premenstrual syndrome and breast pain "as unacceptable for food products. Yet much promotional material implies that evening primrose oil is beneficial in premenstrual syndrome. Scotia defend this by saying

their claims are backed by placebo-controlled trials.

Roche deny that their product is marketed for premenstrual syndrome: the package insert for Starflower oil states that GLA helps "maintain the balance of hormones and many important skin and body functions"... and "at certain times of the month, the level of GLA might become depleted and we should try to replace it with a natural supplement."

When a recent trial found Efamol was no more effective than placebo in menopausal flushing (*BMJ*, 308, p501-503) Scotia issued a statement supporting the findings, saying that the trial was set up because menopausal women had reported beneficial effects. The company referred to its acceptance of negative results as "an example of responsible behaviour."

The Evening Primrose Oil, sponsored by Seven Seas, said they had never recommended the oil for helping with menopausal flushes. "However, we do know of many women who have found that evening primrose oil supplementation helps to iron out the symptoms of hormonal imbalances such as premenstrual and menopausal mood swings."

Surveys have shown that more than 80 per cent of the growth in sales of evening primrose oil was due to women using it to cope with the menopause.

US rules on claims

The US Food and Drug Administration is introducing new rules to regulate the health claims manufacturers can make about dietary supplements. From July, any health claims must be supported by "significant scientific agreement among qualified experts."

Comments Dr Horrobin: "We would be entirely happy with a licensing system for consumer products which required manufacturers to produce evidence of the safety, efficacy and stability of their own products. The sensible approach might be to try a voluntary system first. If that failed, we would take the view that a compulsory system should be introduced."

Scotia intend to apply for a product licence for an OTC evening primrose oil product later this year, for an indication he cannot disclose at this stage, so maybe this will give them the edge they feel they deserve.

Health check plus meal ideas

A new vending machine that measures weight, height, pulse rate and blood pressure is available from Stevens Servicing Ltd.

The Personal Healthcare Centre also shows a seven-day menu plan with breakfast, lunch and dinner suggestions for a healthy, balanced diet.

Stevens believe that the combination of a weekly menu and basic health check will encourage customers to return again and again to monitor their progress.

The free-standing unit provides users with a printed record which can be kept in the free folders supplied from a dispenser. A large VDU screen and poster display area provides space for in-house sales messages and cross-merchandising to promote related products.

Stevens calculate that at a basic vend price of 50p the unit will pay for itself within two years at 10 vends a day. Over 50 vends a day are not uncommon where the unit is already installed in Europe and the Americas, they add.

Stability and safety conform to all relevant EC standards. Sales inquiries and information requests should

be addressed to Bryan Wall, Practical Marketing, 185 Felmongers, Harlow, Essex CM30 2DW (tel:0279 429670).



FSC

<p><i>For women planning a pregnancy, in those months pregnant, government advice recommends they increase their intake of folic acid.</i></p> <p><i>Occurring naturally in foods such as fresh fruit, wholemeal bread and green vegetables, research has found folic acid to be essential for healthy growth of the baby's developing nervous</i></p>	<p><i>system and production of red blood cells.</i></p> <p><i>However, it can't be found in a more concentrated form than FSC Folic Acid tablets.</i></p> <p><i>They're just one in a wide range of advanced formula vitamins and minerals developed to give the body a helping hand when it's needed most.</i></p>	<p><i>Every FSC supplement is formulated by top British and American technologists, chemists and nutritionists to help ensure optimum effectiveness.</i></p> <p><i>With FSC supplements on your shelves, you can start planning for higher sales figures.</i></p>
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More support for garlic



Picture Kwai Garlic

Evidence is accumulating that garlic may protect against cardiovascular disease. Clinical studies show that garlic may inhibit platelet aggregation, reduce blood pressure, increase fibrinolytic activity and enhance anti-oxidant activity as well as reducing serum lipids.

Dr Andrew Neil and Professor Christopher Silagy, of the Department of Public Health and Primary Care, University of Oxford, came to this conclusion recently in a review published in *Current Opinion in Lipidology*.

They also carried out a meta-analysis of randomised controlled trials of garlic preparations which had lasted at least four weeks. Writing in a recent *Journal of the Royal College of Physicians* they concluded that dried garlic preparations (in doses as low as 600mg daily) or fresh, high allicin-yielding garlic (10-20mg daily) significantly reduce total serum cholesterol over one to three months, with effects persisting for at least six months.

On average, garlic powder preparations reduced total cholesterol by 8 per cent and serum triglycerides by 13 per cent. Non-powder preparations also had an effect but the studies were so highly variable that they were held to be meaningless and not included in the full analysis.

Many trials failed to meet the required selection criteria for the meta-analysis and the authors call for more

rigorously designed trials.

But they drew attention to one well-designed double blind placebo controlled trial involving 100 patients with raised cholesterol levels. After taking either standardised garlic powder tablets (Kwai) or bezafibrate for three months there was a comparable reduction in the total and LDL-cholesterol in both groups and an increase in "good" HDL-cholesterol (*Drug Research* 1992;42(11/12).

The authors conclude: "There is not enough evidence to recommend garlic therapy as an effective lipid lowering agent for routine clinical use. However, there is also no evidence to suggest that it is harmful.

They add: "The currently available data support the likelihood of garlic therapy being beneficial, at least over a few months."

There is a need for large scale clinical trials to assess the effects of vitamin and mineral supplements in HIV infection and AIDS, an immunologist claimed recently.

Dr Raxit Jariwalla, who directs immunodeficiency research at the Linus Pauling Institute of Science and Medicine in California, said there was now enough evidence of benefit to justify such trials.

Over the past decade uncontrolled studies, in which doctors noted their patients' response to supplements,

Conception protection

Pharmacies should be seeing an increased demand for folic acid supplements following a recent Government campaign.

The Department of Health's chief medical officer recommends that all women trying to conceive should take 400mcg of folic acid daily and continue taking it for the first 12 weeks of pregnancy.

But a recent study in *The Lancet* found that fewer than 3 per cent of women making their first visit to some ante-natal clinics had increased their folic acid intake before conception.

As a result the Government has stepped up its campaign to ensure that all women planning a pregnancy are made aware of this vital message. Thousands of leaflets and posters have been distributed through health promotion units and health authorities.

The Department recommends taking a pure folic acid supplement rather than a multivitamin. Folic acid is found in green vegetables, fortified cereals and liver but pregnant women are advised to avoid liver as it is rich in vitamin A which could harm the developing baby.

It is difficult for women to increase their folic acid intake to the recommended amount by diet alone. It could mean eating 20 slices of wholemeal bread or 11 pints of milk.

Manufacturers suggest that women planning to become pregnant should start taking folic acid as soon as they stop taking contraceptive precautions or even as soon as

they reach childbearing age, as no contraceptive method is totally reliable and a third of pregnancies are unplanned.

Health Plus Ltd claim that red tape is contributing to low awareness.

"When we brought in Folic 400, we had inquiries from hospitals who were interested in getting hold of it but, since it is not a registered drug, red tape seems to prevent them from taking these inquiries any further," says manager Simon Bandy. "There have been suggestions that folic acid should be added to flour so that everyone receives higher levels. It really is a sledgehammer to crack a nut.

He feels the Government should tell women about the benefits of folic acid, who makes it and where to get it, rather than wasting money on leaflets telling people how to look after their children.

Folic formulas

Folic Plus, a new one-a-day supplement from Seven Seas contains other nutrients besides 400mcg folic acid.

Vitamin B12 is included for its importance in red blood cell formation. Fish oil is included as omega 3 fatty acids are believed to aid brain and retina development and maintain a healthy pregnancy.

The capsules (60, £2.49) will be available from April.

•Cantassium recently launched a one-a-day 400mcg folic acid. For every pack sold, they give 10p to the Association for Spina Bifida and Hydrocephalus.

Need for more trials of vitamins in HIV

have consistently shown amelioration of AIDS symptoms and improvement in quality of life markers, said Dr Jariwalla.

In a six year prospective study of HIV positive men in the USA, use of daily multivitamins seemed to delay the onset of AIDS symptoms by about six years in a third of patients (*J. AIDS*, 1993, 6, 949-58). Another small, controlled trial showed that beta-carotene boosted levels of helper T cells which are destroyed by HIV.

Dr Jariwalla said that

micronutrient deficiency and malnutrition lower resistance to HIV, allowing the virus to proliferate and the disease to progress. HIV infection damages the intestinal lining leading to malabsorption which in turn increases the risk of malnutrition. Exposure to infections also results in overproduction of free radicals which leads to anti-oxidant depletion.

There was evidence that several micronutrients help to boost immunity, and vitamin C could suppress HIV replication, he said.

April falls

There will be an "April falls" price cut promotion on healthcrafts One-a-day products this month and next. Multivitamins with iron and calcium will be reduced by 50p to £1.69 for 30. Cod liver oil capsules and flavourless garlic will both go down 56p to £1.69, while the 10-pack of evening primrose capsules 500mg will retail for £2.99 instead of £4.25. Ferrosan Healthcare say these Spring offers are just part of a comprehensive promotional campaign to raise Healthcrafts' profile.



The company launched a one-a-day multivitamin and mineral anti-oxidant formulation last December. Containing vitamins C, E and beta-carotene with B vitamins, calcium, iron and zinc, the product provides 100 per cent of the EC recommended daily amounts plus higher levels of the key anti-oxidants. It is being promoted with value for money offers and media samplings.

This year there are plans to launch a sugar-free multivitamin and mineral supplement into the SuperTed range.

Seatone is being supported by an advertising and promotional campaign of over 150,000 this year, including advertisements in retirement magazines and editorial features. This Spring, marine scientist John Croft is coming over from New Zealand once again to discuss the Seatone research programme with journalists and on national and regional radio.

The company offers three programmes to help pharmacists merchandise the range and present a more professional image. The introductory range containing 7 products is suitable for small pharmacies, the mid range offers up to 30 products and the top range features up to 60 products.



Six launches in six months

Seven Seas Healthcare plan to launch six products in the next six months. New product development, in answer to consumer demands and in response to clinical research, is a priority, they say.

The company will be supporting its leading brands including Seven Seas pure cod liver oil, Seven Seas multivitamins, Seven Seas evening primrose oil, Hofels garlic, New Era and Minadex with a record £9 million package.

A total of £3.5m support, including national television, has been committed in 1993-94 to promote the benefits of fish oil supplementation. Educational advertisements for Seven Seas high strength pure cod liver oil liquid will appear in the national, specialist and retirement Press from April to June.

Sanatogen add Starflower

Sanatogen Starflower oil (50 capsules, £5.99) launches this month with an independent pharmacy promotion.

Pharmacies placing an order for 10 cases of Sanatogen products, one of which must be Sanatogen Starflower oil, will receive a free overnight travel case.

Product manager Peter Durose says: "Starflower oil will appeal to women who are lapsed evening primrose oil users who were possibly put off by the large volume of primrose oil capsules needed daily and their cost. The Sanatogen branding will make it accessible to a wider audience who believe and trust in the Sanatogen name."

Sales of Sanatogen products grew by 10 per cent in 1993 to be worth £23 million and he believes they will reach £26m this year.

Three special packs

Lifeplan Products have brought out special introductory presenters for new customers in pharmacy.

There are three packs, available: cod liver oil in a variety of sizes; Daily Ones (one-a-day formulas) — time release vitamin B6, kelp and alfalfa, chewable calcium, B complex prolonged release, chewable vitamin C and cod liver oil and garlic; and Lifeplan Four — vitamin C 1000, Extravite, GLX EPO 500 and Happy garlic. Retailers taking all three packs in one order get an extra discount.

Tailor-made service

Healthlife can offer a tailor-made business planning service.

Sales merchandisers visit once a month or on call to provide a full POS service, including a clean down, window and shelf displays, and a stock and order service.

Healthlife also run monthly promotions on selected products, depending on the time of year. These are backed by advertising, public relations and special POS material. Promotions can be tailored to meet retailers' individual needs.



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Accent on research

Determined to improve on last year's 26 per cent sales increase, Wassen International are investing £750,000 in public relations and advertising campaigns this year.

Sampling offers and consumer surveys will be backed by trade incentives for independent pharmacies. New formulations are to be announced.

Promotion of Selenium-ACE will focus on the retirement, specialist health and women's interest titles. Sampling offers and themed promotions will run for Coenzyme Q10 + vitamin E.

Reader offers and feature articles on Magnesium-OK will appear in women's magazines, while Confiante will be promoted in the women's and specialist health titles.

Selenium-ACE has gained from studies showing beneficial effects of anti-oxidants and it is hoped that a controlled trial in people with rheumatic problems will start this year.

An open study published in the *British Journal of Clinical Research* (1993:4, p219-224) showed beneficial effects in women with clearly defined premenstrual syndrome. Moderate, good or excellent improvement was seen in 70 per cent of the 204 women. Follow-up studies are under way.

Three from FSC

Health & Diet Co will be launching three products next month. FSC's daily vitamins and minerals contain 100 per cent of the EC recommended daily allowance of most vitamins, plus calcium, magnesium, zinc, manganese, boron, copper and silicon (30 tablets, £3.99).

Beta-carotene is included, derived from deep sea algae grown in unpolluted waters. But the company opted to exclude vitamins A and D as they are available only in synthetic or animal form, not suitable for vegetarians or vegans.

Other new additions are FSC biotin 2.5mg tablets (30, £4.69) and FSC calcium pantothenate tablets which provide 500mg of pantothenic acid or vitamin B5

(30, £3.69). Both are suitable for vegetarians and vegans.

Biotin, a member of the B-complex family, is found in nuts, brewer's yeast, beef liver, egg yolk, milk, kidney and unpolished rice. It is rendered inactive by avidin in egg white and inhibited by sulphur drugs and antibiotics. It is thought useful in controlling candida.

The products are free from gluten, wheat, yeast, dairy products, soya and corn.



Gerard House bloom as sponsors

Gerard House are embarking on two sponsorship projects this Spring and Summer.

Both focus on the symbiotic parallels between the promotion of herbal medicine and the fight to stop the continuing depletion of plant life.

Plantlife is a charity dedicated to saving wild plants in their habitats. Gerard House are sponsoring Plantlife leaflets and dispensers through pharmacies and health food outlets, to promote the charity.

The second project sponsors a fountain by sculptress Kate Malone, which is the centrepiece of the Geffrye Museum herb garden in London's East End.

Starflower on TV

Roche Starflower oil made its television campaign debut last month in London.

More support comes from Press advertising in women's magazines. A new 500mg capsule, in packs of 30 and 60, joins the 250mg strength, and Roche Consumer Health are continuing their education programme for pharmacists.

Redoxon Protector is being supported by public relations, and Press advertising into the Summer. POS material includes a counter unit and literature.

PRODUCTS

Staff prizes from Efamol

A luxury weekend at Champneys health resort is the first prize in an **Efamol** competition for pharmacy staff. There will be 100 runner-up prizes of cosmetic kits. Entry forms are available from Zyma Healthcare territory managers or by calling the sales service department on 0306 742800. Entries must be received by April 30.

●**Consumer Press** advertising for **Fish Factor** is to appear in key health and fitness publications. Containing vitamins A, C and E and beta-carotene as well as fish oils, the product was launched last year to appeal to growing interest in anti-oxidants.

●**Vitabiotics** will be extending their consumer advertising for Premence and Menopace through the Spring and Summer. The campaign, worth well over £500,000, covers more than 30 top consumer titles including *Best*, *Cosmopolitan*, *Woman's Realm*, *Family Circle*, *Good Housekeeping*, *Elle*, *Marie Claire* and *Essentials*.

●**Unichem's** vitamins will be promoted this Autumn as a "Buy two, get one free" offer which will appear in the national Press. There will be a feature on vitamins and food supplements in an issue of Unichem's *Healthy Times* magazine, free to customers in Unichem pharmacies.

●**Kwai garlic** has a £1.75m advertising and promotional budget for 1994. The year started with a £500,000 consumer advertising campaign in the national Press and retirement publications. Lichtwer Pharma are also sponsoring the LBC radio "Bodytalk" programme.

●**Chlorella**, a micro algae nutrient used by people wishing to take natural vitamins and minerals, is available in a POS display box showing six packs of one-month drums of the tablets. Minimum order is for the six (£35.10). Posters and leaflets are available for in-store use.

Advertising is being planned on the London Underground and on buses this month and next, and in *Vegetarian Living* and *Har & High*. Editorials are expected in *Essentials*, *Daily Mail*, *Satellite Times* and *Daily Mirror*. Aston Villa football team is being used in promotions as members have taken Chlorella for two years.

●**Power Health** are running a public relations campaign for Celaton CH3 Tri Plus through local radio. Active Mega H40 has an added value offer of ten days extra supply free with every pack, backed by national advertising and POS material.

●**Health Plus** are bringing out new multipacks. Multivite one-a-day supplement is available in a 90-day as well as a 30-day size and Konjac fibre comes as 180 capsules as well as 70. Absorb Plus is available as a 28-day trial pack in addition to the 60-day size.

●**Pharma Health & Beauty (UK) Ltd** are supporting Nourkrin (for hair) and Nourelle (for skin) with a consumer advertising and public relations programme. Insertions are appearing in national newspapers and magazines. Both are natural food supplements based on a compound extracted from fish cartilage, blended with trace minerals, vitamins and organic silica.

New look for Idoloba

Idoloba is about to be relaunched with a £250,000 advertising and public relations campaign — which Ferrosan Healthcare say is the first major campaign for a ginkgo product.

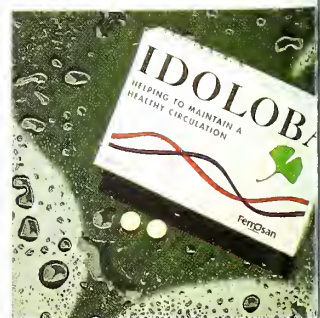
New packs focus on the product's main claimed benefit: "Helping to maintain a healthy circulation." The message is reinforced in consumer leaflets.

Colour advertising starts next month in *Woman's Realm*, *Woman's Own*, *Woman's Weekly*, *Woman & Home*, *Family Circle* and *Good Housekeeping*. Public relations concentrates on the fact that Idoloba is the only ginkgo brand to be funding research, the results of which will be published in the national, specialist, retirement and women's interest magazines.

Retailers will be provided with posters, ginkgo leaves,

large dummy boxes, display backing boards, shelf wobblers and display units containing 16 x 30 tablet packs.

Catherine Bardsley, senior brand manager at Ferrosan, says the market for ginkgo products in France is worth over £500 million and in Germany £575m: "We've had a fantastic start in this country with Idoloba, but there is so much more potential."



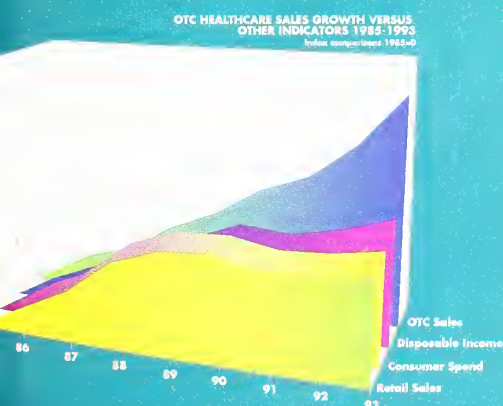
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For many years the Benn pharmacy magazines have helped keep readers up to date with industry news, issues, product innovations and market developments. Now Benn is deploying its unrivalled industry knowledge, unique position,



industry contacts and databank of original research to produce an authoritative and comprehensive report on the OTC medicines market.

The total OTC medicines market in the UK

will be worth well over £1 billion in 1993. Key issues in this dynamic consumer market include: the impact of drugs coming off patent, industry strategies as the global giants compete for their shares of OTC, the increasingly competitive retailing environment, the growth in market share of natural products and the impact of POM to P switches. The Benn OTC Healthcare Report will be available in March price £375. The report is the essential marketing reference work for an industry facing the challenge of change.

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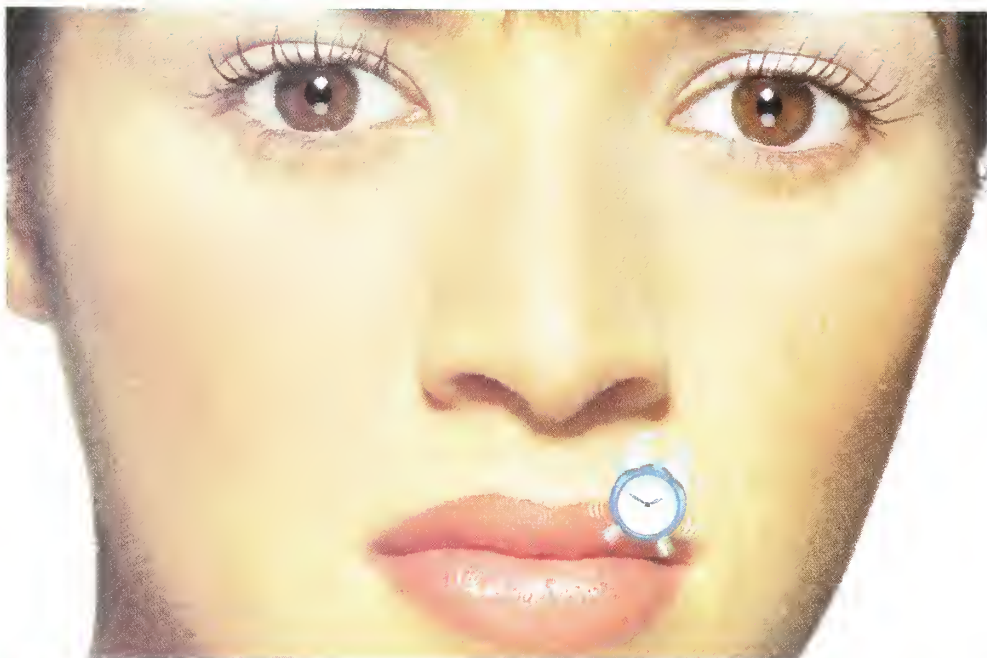
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perfume: What
women use
and why?
Selling the new
H₂-antagonists
Get your
message across
customers



COLD SORES?

A MAJOR BREAKTHROUGH



Treating the tingle can prevent a cold sore



ZOVIRAX[®]

COLD SORE CREAM

Early use can prevent a cold sore

ZOVIRAX COLD SORE CREAM[®]. Acyclovir. Essential information: **Presentation** 5% w/w acyclovir in water miscible cream base. **Uses** Cold Sore treatment **Dosage and administration** Apply 5 times a day for 5 days. It is important to start treatment as early as possible after the start of an infection, ideally during the tingle phase. If healing has not occurred, treatment may be continued for up to an additional 5 days. **Contra-indications, warnings, etc.** **Contra-indications:** Zovirax Cold Sore Cream is contra-indicated in patients known to be hypersensitive to acyclovir or propylene glycol. **Precautions:** Zovirax Cold Sore Cream should only be used on cold sores on the lips and face. Do not apply inside the mouth or in the eye. Do not use for herpes infections of the eye or genital area. Do not use if the patient is under the care of a doctor because of a weak immune system. **Side- and adverse-effects:** Transient burning or stinging may follow application. Mild dryness or flaking of the skin has occurred in about 5% of patients. Erythema, itching and contact dermatitis has been reported rarely following application. **Retail Selling Price** - subject to Retail Price Maintenance: 2g tube - £4.99 (PL 3/0304) **Legal category** P. Further information available on request: Wellcome Medical Division The Wellcome Foundation Limited Crewe Hall, Crewe

SUPPLEMENT TO

CHEMIST & DRUGGIST

March 26, 1994

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What does the perfume you wear say about you?

That bottle of perfume on your dressing table says more about you than you realise. C&D's Sarah Purcell decodes the fragrance message

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Skincare solutions for teenagers

Mother Nature plays a sick joke on teenagers when she plagues them with spots and acne, as Jacqui Brommell explains

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Coping with that time of the month

What turns self-assured women into quivering wrecks? Zita Thornton looks at how to cope with PMS and other period problems

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OTC

With the variety of contraceptive methods available today, it's easy for a girl to get confused. But, as C&D's Marianne Mac Donald finds out, at least she doesn't have to contend with crocodile dung like her less-fortunate ancestors

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Selling the new OTC

With Smithkline Beecham's Tagamet 100 and Centra's Pepcid AC now available over the counter, pharmacy assistants have a whole new category of products to become familiar with, and counselling points to remember

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Communicating with your customers

Maggie Maladie is suffering from an attack of thrush but, because it's the weekend, she can't get a doctor's appointment for a couple of days. Luckily, you can recommend an OTC thrush treatment

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Making the most of your patient medication records

Whether you opt to use a simple card index or a sophisticated computer software system, patient medication records can make a big difference to life in the pharmacy, as Jeremy Clitherow FRPharmS explains

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Communicating with your customers

It doesn't matter how often you tell somebody something unless they actually hear and understand your message. As training consultant Diane Bailey explains, there's much more to communication than just words

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The new skincare brand Glysolid is a marvellous range of products particularly adapted to the needs of sensitive skin. This range comprises three products for a complete body treatment.

The Skin Care Cream and Body Lotion contain as their main active ingredients glycerine and allantoin (a healing extract from the comfrey plant) but are manufactured without the addition of preservatives, fragrances or lanolin.

The Hand and Nail Balm also contains keratin, wheat germ oil and vitamins A, E and F which help treat and protect the hands against the day-to-day damage caused by harmful environmental influences.

The Glysolid products have been carefully formulated to help retain

Glysolid



the skin's essential moisture, and to rebalance those very dry parts of the body which need special attention such as the elbows, knees, feet and hands.

The range's gentle formulation does not irritate the skin and can be used by the whole family and can be applied after shaving and waxing to soothe the skin.

The Glysolid products have been tested dermatologically and approved by the Swiss Institute for Household. They are manufactured without cruelty to animals.

The recommended retail prices for the Glysolid products are as follows: Glycerine Cream £2.99, Body Lotion £4.40, Hand and Nail Balm £3.99.

For special introductory offer and more information please contact: Santo Products Limited, Tel: 081-381 1334 (Fax: 081-905 6211).



If I had been asked to make a prediction for 1994, I would have said that pharmacies are going to get bigger. Not because I envisage new roles that need oceans of extra space, although these are very much on the horizon, but because with all the new POM to P products coming through, shops are going to need more space.

Last year, the Government announced more switches of products from prescription status to pharmacy status than had happened in the last ten years put together.

The H₂-antagonists, Tagamet and Pepcid AC, have been granted their OTC licences, as has Beconase hayfever spray and numerous sodium cromoglycate eye drops.

The new products are gradually beginning to trickle through onto the shelves. But this could become something of a deluge with staff swamped under the weight of product information, training packs, point of sale material, customer leaflets and such like. And that's before you start finding room for everything on-shelf.

If you're looking for a quick guide to the new products, and what they can be used for, why not check out "Showcase" on page 39?

Gazing into the crystal ball once again, I can predict that, this Summer, hayfever sufferers are going to be spoilt for treatment choices. We'll cover all the information you need in our next issue. Look out for it!

Jane Feely

Jane Feely

Supplement Co-ordinator

HEALTH NEWS

Assistants to be trained by 1996?



Proposals by the Royal Pharmaceutical Society could mean that by January 1, 1996, each member of staff who is involved in the sale of medicines should have completed, or be undertaking, an appropriate training course.

The proposals are still at the discussion stage, but it's likely that courses like the Medicines Counter Assistant's Certificate run by the NPA will be considered "appropriate".

The Council believes that the public has the right to expect that staff involved in the sale or supply of medicines are trained and have up-to-date knowledge about the products they sell.

And the proposals don't stop at training. It has also been suggested that by January 1, 1995, each pharmacy should have written protocols covering the procedures that must be followed when a medicine is sold or when a customer seeks advice on a medical condition.

This will cover areas such as the sale of medicines for young children, what to do if medicines have a common ingredient, the use of patient records and customer confidentiality.

It will be your pharmacist's responsibility to make sure that the staff have read the protocols, and that assistants follow them every day.

The proposals have met with support in theory, but many pharmacists are concerned about the practical implications, such as the cost of training staff.

If you have any strong views, talk to your pharmacist. He/she can submit comments to the Society up until April 30.

A final document is expected to go before the Society's Council in June.

Condoms are becoming a way of life

Condoms are fast becoming a way of life for today's youth and almost as many women as men now carry condoms at all times, according to the Great Mates Sex Survey, carried out in conjunction with Sky magazine.

The survey found that 85 per cent of Sky readers in the 16-25 age group now use condoms, which is a vast improvement on previous years when the figure was around 55 per cent. Nearly two-thirds said they would be pleased if their partner produced a condom on the first date!

Just over a third had lost their virginity before the age of 16 and two out of five had slept with more than five partners. At least three out of five had had unprotected sex at some time.

Although the safe sex message seems to be getting through, the survey revealed there is still some embarrassment when it comes to discussing condoms. Just under three-quarters of young lovers will wait until they are down to their underpants before they discuss the issue of rubbers.

When asked if they would consider not using a condom if their partner objected, half said: "Yes, what the hell" and the rest said: "No way".

While safe sex may be the norm at the start of a relationship, these good practices don't persist. Over 60 per cent stopped using condoms once they had become familiar with their partner and before they had both been fully checked out for HIV and other sexually transmitted diseases.

Cope with garden pollen

Hayfever affects between 10 and 20 per cent of the population. For these people, the prospect of warmer Summer months is not so exciting. Being outdoors in the pollen season can be very uncomfortable for some, and debilitating and even dangerous for others.

But there's one group of people whose favourite pastime takes them into direct conflict with pollen — gardeners. To help them enjoy their hobby, a new booklet has been published with tips on planning a garden to try and minimise the effect of hayfever.

Plants are graded as major, frequent and occasional causes of hayfever, so that the worst culprits can be picked out and preferably eliminated from the garden.

Other helpful tips include:

- Garden on cold days, dull days or immediately after it's stopped raining
- Garden first thing in the



morning, rather than in the late afternoon, when pollen levels are higher

- Check local pollen forecast in newspapers or on the radio. If the level is above 50, postpone gardening for another day
- Wear sunglasses to stop pollen getting into the eyes
- Get someone else to mow the lawn!

The booklet, *Hayfever in the Garden*, is sponsored by Marion Merrell Dow Ltd.

Educate your asthmatics



Fewer than one asthma patient in ten questioned in a recent survey felt they had received plenty of information about their condition.

In addition, more than a third of asthmatics were not shown how to use their inhalers correctly and only one in four were given written instructions on how and when to take their medicines.

It's not that there's a shortage of information on asthma around. Far from it. The survey by the National Asthma Campaign reveals that GPs and practice nurses are more likely to give written information about asthma than on conditions like heart disease and diabetes, but it appears that the patients still want more.

The diagnosis of asthma has an emotional impact on those surveyed. Nearly a third said they were extremely worried, one in five were frightened and 14 per cent were bewildered.

Pharmacists have an important role in trying to educate people about their asthma and on helping them practice good inhaler technique, according to Dr Martyn Partridge, chairman of the Board of the NAC.

The Campaign deals with all aspects of asthma and related allergies. Funded by voluntary contributions, it offers advice and support to people with asthma and their families. It also runs the asthma helpline on 0345 010203.

Morning-after Pill is not set for GSL status

Newspaper stories that the morning-after Pill could become General Sales List medicine, and be on sale in supermarkets and garages, have proved something of a misconception.

A report in the *Mail on Sunday* last month suggested that the Royal College of Obstetrics and Gynaecology was about to make

such a proposal to try and reduce the number of teenage pregnancies. However, it now appears they have no plans to seek GSL status, but may consider a P licence.

However, the manufacturer of PC4, Schering Health Care, are opposed to any move from prescription-only control.

Want more information?

Every issue, *Over the Counter* gives details of some of the leaflets and booklets available, relating to topics covered in that issue, with details of where these can be obtained (for company addresses and telephone numbers, see the *C&D* Monthly Price List).

Subject	Product(s)	Where obtained
Period pain	Feminax	Feminine Pain Advisory Service PO Box 8 Broadwater Road Welwyn Garden City Herts AL7 3AY
	Nurofen	Period pain booklet offer Nurofen Advisory Service PO Box 63 High Wycombe Bucks HP10 8XA (send 8" x 5" SAE)
Condoms	Durex	LRC Products
Thrush	Canesten	Bayer Plc
	Femeron	Janssen Pharmaceuticals
Cystitis	Cymalon	Sterling Health
	Cystopurin	Roche Consumer Health
Women's health	Cymalon	Sterling Health
	Kotex/ Simplicity	Kimberly-Clark Ltd
H ₂ -antagonists	Pepcid AC	Centra Healthcare
	Tagamet 100	SmithklineBeecham

Go to the cinema courtesy of Blisteze

We all enjoy a night out at the cinema, but tickets, like everything else, are going up in price. Now Blisteze are offering three assistants the chance to have a night out on them.

The current Blisteze advertising on the big screen is running at a time of year when people are most likely to develop cold sores, and at a time when we tend to get the coldest weather and to suffer from sore and chapped lips. The advertising aims to target younger users in particular.

To coincide with their cinema campaign, Blisteze have three pairs of Odeon tickets to give away to readers of *Over the Counter*. To enter, simply send your name, address and name of your pharmacy to *Over the Counter/Blisteze Offer, Chemist & Druggist*, Benn Publications, Sovereign Way, Tonbridge, Kent TN9 1RW, to arrive no later than Monday, April 25. The first three names out of the hat after that closing date will each receive two tickets. Then all they have to do is decide who to take with them!



So they want to buy a film?

Selling a film is easy — provided customers know exactly what they want! But what if they don't?



The first thing to remember about selling a film is that it is easy. The customer who comes into the shop for a film probably knows exactly what they want and will ask for it by size — 35mm or 110, speed — ISO 100 or 200, and number of exposures — 24 or 36.

It's as easy as taking the film from the display, ringing up the purchase on the till, handing the film over and, bingo, there's another satisfied customer.

The second thing to remember about selling film is that it's not always easy! Customers who come into the shop and ask for a film may not have a clue about the size, won't understand about ISOs and won't be sure how many exposures they want.

Think about speed

So how do you respond? Size is the first thing to think about. Your customer may well bring their camera in with them but, if not, will probably remember that the film they wants is either the one in the cassette you slot into the camera — that's the 110 film — or the roll film in the round canister — that's the 35mm, or 135 as it says on the pack. There are also 126 and disc films.

Speed is next. Ask when the film is most likely to be used and in what conditions. If it's mainly for outdoor use in the sunshine, then the ISO 100 film is the one to

suggest. The ISO rating refers to the speed at which the film absorbs light, so on a bright day, a so-called "slow" film will be sufficient.

If the customer reckons the camera will be used in more varied conditions, then a faster, more absorbent film such as the ISO 200 would be a better buy. It may be that an even faster film like an ISO 400 is best, as this is better for lower light indoor and outdoor uses. However, it does cost a little more.

Are you loaded?

If you're asked to load the film for the customer, make sure you've practised first. By the way, Fuji have just overcome loading difficulties with their DL cameras — you just drop the film in the back, close it and the camera does the rest!

The third thing to remember about selling film is that it is very good for business, as most customers return to where they bought their film to have it processed.

Having decided about the film they need, why not suggest that they buy a second film just in case, especially if there's a special offer on twin or triple packs? Or maybe "something for the weekend" — one of those popular, disposable cameras may be just the thing to pop into his briefcase or her handbag. (Material provided by Fuji Photo Film UK Ltd)

A sensitive subject

It's easy to forget the primary function of breasts is to feed babies. We're bombarded by images of the perfect pair in glossy magazines, the infamous "page three girls" and adverts for plastic surgery. Breast size goes in and out of fashion as often as hemlines go up and down, with the return of the cleavage last year usurped by the flat-chested waif-look this year. It's little wonder that few women are happy with their breasts.

A breast is a mass of fatty tissue containing 15-20 clusters of glands which produce milk. Channels from each gland join together into clusters, which have a main duct opening at the nipple. There is no right or wrong breast shape. What is important to be aware of is what is normal for you.

All women should be encouraged to carry out regular self-examination. This is best carried out a few days after your period, or the first week of each month if not menstruating. With flat fingers, feel all over each breast and armpit using small circular movements.

If you feel something unusual, first check the other side. If the lumpiness is the same on both sides, check your breasts again the following month.

If you do find a lump it does not necessarily indicate cancer. Nine out of ten lumps are benign. If the patient is under 30, a lump is most likely a fibroadenoma, a small moveable lump. Cysts, which tend to appear in older women, may resolve themselves or have to be drained off.

The commonest breast

disorder is pain (mastalgia), affecting up to 70 per cent of women. The first question to ask a patient complaining of pain is whether it is felt just before a period (cyclical), occurs randomly or is continuous (non-cyclical). Pain can be an early sign of cancer, but this is more likely when pain is non-cyclical, one-sided and constant.

About three quarters of women with breast pain have cyclical mastalgia. Pain is often associated with a lumpy, heavy sensation in the breasts. In some cases the pain can be so severe it interferes with work and personal relationships.

Breast pain is due to abnormal sensitivity of the tissue to normal levels of female hormones. Sensitivity has been linked with high levels of saturated fats and low levels of unsaturated fats in the blood.

Charting pain

Once the GP has examined the patient and ruled out cancer, she will be asked to keep a pain chart over three months to determine how she can be treated. Meanwhile, self-help measures include improving diet, taking in less saturated fats; analgesics can help reduce pain; and comfort can be improved by having bra sizes measured correctly. If the patient is on the Pill, either coming off it or switching to a higher progesterone Pill may help.

If the pain is interfering with the woman's lifestyle, treatment is considered. The first treatment recommended for cyclical mastalgia is gamolenic acid (GLA), derived from evening

primrose oil. The recommended dose of GLA is three to four capsules twice daily, with treatment usually taking three to six months to work.

If GLA fails, bromocriptine or danazol are used. These work quickly and are usually only used for six months. However, both drugs can have unwanted side effects.

Treatment for non-cyclical breast pain depends on whether pain is felt all over the breast (diffuse) or just in certain spots (localised).

Diffuse pain is treated with a non-steroidal anti-inflammatory drug, GLA or a hormonal drug. For localised pain, the most tender spot is injected with a local anaesthetic and a steroid. If the pain comes from the ribs or chest wall, pain killers may suffice.

Causes for concern

If a customer complains of any of the following symptoms, recommend she visits her GP immediately. The earlier problems are detected, the more chance of successful treatment.

- Sudden change in shape of one breast
- Pain in one breast
- A single lump, different in texture from the rest of the breast
- Rash or discharge from the nipple
- Change in breast skin colour or texture, including dimpling and flaking

Where to get help

- Breast Care Campaign
☎ 071-371 1510
- Women's Health Concern
☎ 071-938 3932
- Medical Advisory Service
☎ 081-994 9874
- Women's Nationwide Cancer Control Campaign
☎ 071-729 2229

Diary of a sufferer

June Anderson's problems started six years ago when she had a hysterectomy. It started with pain in her breasts. She went to her GP straight away, but he wasn't particularly helpful, telling her it was probably "her age". She put up with the pain a while longer, but then developed lumps in her left breast which she had removed, but the pain continued.

At times she felt pain for up to six weeks at a time and had difficulty with everyday tasks such as driving. Her GP put her on danazol. "They made me feel like my head was going to explode," she says. She only took a few tablets, then stopped. GLA was not suggested to her until two years ago. She now takes ten capsules a day. "I find it does help. I now only have pain for about two weeks at a time," she says.

In addition, Ms Anderson has taken steps to improve her diet, cutting out red meat and caffeine. A mastectomy has been suggested but she's reluctant to agree. Her advice to any woman with breast pain is to visit their GP immediately, for peace of mind if nothing else.

Picture courtesy of the Breast Care Campaign

Look what we delivered in '93



What's in store for '94?

Over the past 3 years Farley's have continued to deliver the fastest growing babyfeeding range – new packs, new

products and new advertising. This investment continues in 1994 with a further £10 million support package and...

SO FARLEY'S SO FOOD



message in a

Sexy, mysterious, sophisticated, feminine, carefree these are just a few of the impressions of you that your perfume can reveal to others. Sarah Purcell explains how to decode the fragrance messages and advises on choosing a new scent

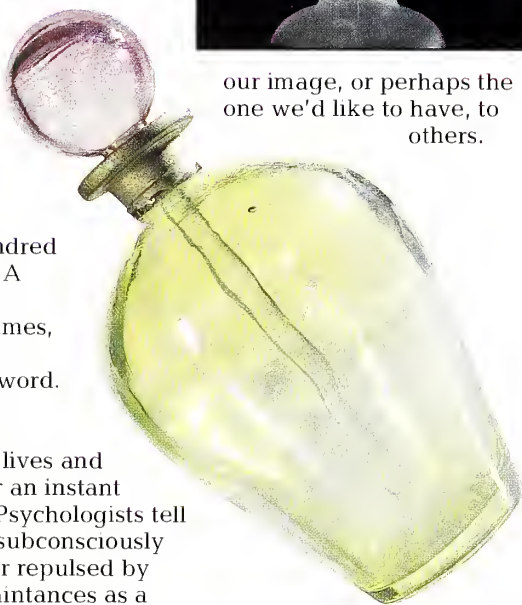
A single whiff of

perfume can bring back a hundred memories. A smell can speak volumes, without uttering a word. It plays an important role in our lives and can trigger an instant response. Psychologists tell us we are subconsciously drawn to or repulsed by new acquaintances as a result of their personal smell.

Wearing perfume is a way of expressing our personalities, projecting



our image, or perhaps the one we'd like to have, to others.



Everyone has their own

personal smell, with brunettes, blondes and redheads all having different kinds of smell. This is why the same fragrance will smell slightly different on everyone who wears it.

A fragrance "works"

when the combination of the wearer's personality, personal smell and the fragrance come together. It then becomes an integral part of the wearer - for example, you may always associate the scent of Chanel No5 with your mother because she used to

wear it when you were young.

Fashion scents

Just as fashion reflects the mood of the moment, so does fragrance. Each decade can be marked by the fragrances that were popular at the time. Female emancipation in the 20s saw a move to all things modern, with favoured scents of the day Chanel No5 and Mitsouko. Post-war Britain in the 50s marked a return to femininity and luxury after rationing, with Diorissimo, Youth Dew and L'Interdit all the rage. The hippy 60s saw a growing awareness of self and an interest in nature. The air was awash with the scent of

patchouli oil and floral fragrances such as Fidji.

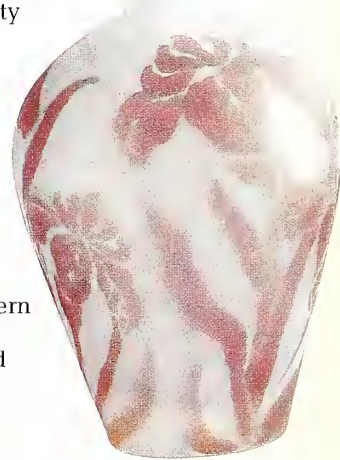
And in the '70s Charlie was every girl's best friend. The heady days of the 80s saw the popularity of impactful, lingering potions to match the power-suited women such as Poison, Obsession and Giorgio.

The nineties has been dubbed the "caring" decade, with increased interest in the quality of life, the family and concern for environmental issues. This has spawned the new breed of ozonic fragrances inspired by nature,



characterised by fresh green and oceanic notes. These include Dune,

New West, Safari and Escape. We've also seen a renewed



interest in the self and more

Fancy a change?

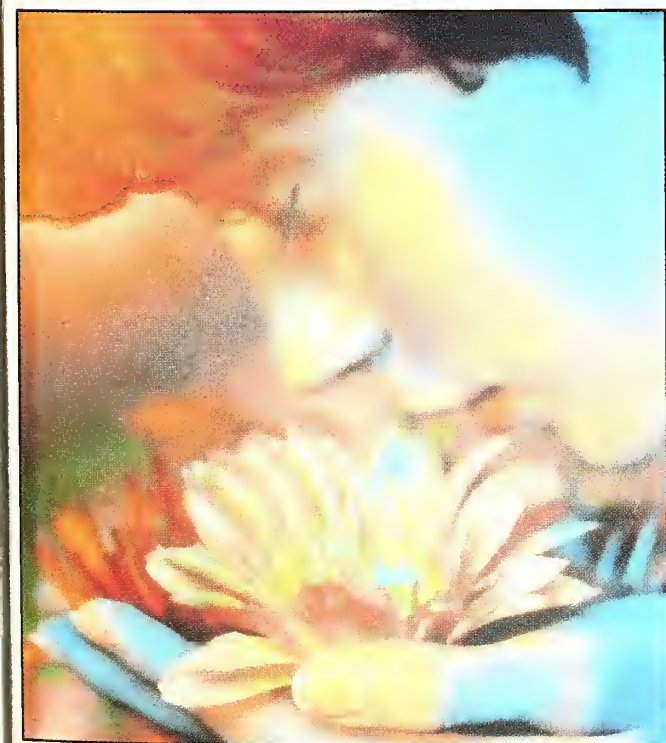
You're bored with your current perfume, fancy a change or have smelt one you like on a friend or in a magazine. Before you rush out and buy, stop. Just as you'd never buy a new outfit without first trying it on, fragrance needs to be tried too. Advise customers to spray the tester onto wrists and wait 30 seconds for the alcohol to evaporate before smelling the top note, the first impression of a fragrance. It then needs to be left for two to three hours to allow the heart and base notes to develop. Once it's had a chance to mingle with your own personal smell, you should know whether it suits you or not.

When testing, you shouldn't try more than three at a time, trying the lighter fragrances before the heavier ones. Resist the temptation to encourage your customer to make a snap decision. Advise her to think about it for a day or two first. If you've done your job properly she'll be back.



bottle

natural, alternative therapy, which has resulted in a surge in popularity of aromatherapy and new "mood enhancing" fragrances, such as Guy Laroche's Horizon for men, Yardley's Esprit Vital and Potter & Moore's Essentials. These claim to stimulate or relax the mood of the wearer.



Fragrance families

It's quite a mistake to think of perfumes as being divided into 'families'. In fact, the word 'family' is a marketing device.

Oriental is warm, spicy and often musky; **Floral** is feminine, light and flowery; **Floriental** is sweet, warm and fruity; **Green** is fresh, clean and masculine; **Ozonic** is fresh, modern and smells like the sea.

Oriental: Opium, Mitsouko, Casmir, Coco, Shalimar

Floral: Beautiful, Laura Ashley No1, Anais Anais, Paris, Tresor
Floriental: Amarige, Salvador Dali, Laguna, Yardley Forever, Spellbound, Narcisse

Green: Clarins Eau Dynamisante, O de Lancome, Vent Vert

Ozonic: New West, Safari, Escape, L'Eau d'Issey, Dune.

The choice of a fragrance is an individual, very personal one. Sarah Purcell asked ten women what their favourite perfume is and why they wear it.

Sumi Ratnam, 24, psychiatrist at St Mary's hospital
Star sign: Cancer
I like Gio by Giorgio Armani

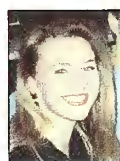


because it's exotic, warm and spicy. I wear it for a good night out, when it makes me feel outgoing and confident. I have several more subtle ones I use for work.

Karen Birchwood, 28, textile designer
Star sign: Cancer
I prefer Calvin Klein's



Eternity as it's not too overpowering. I like it because it's not too feminine either, I don't like pretty fragrances. When I wear it I feel more sophisticated. I do have other perfumes too, but they all tend to be similar types.



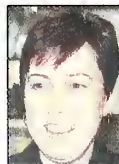
Hannah Smith, 27, account manager in public relations agency
Star sign: Sagittarius
Opium is my all-time favourite and I've worn it ever since I started wearing perfume. I only wear it in the evening and it makes me feel glamorous, attractive and feminine. For daytime I love Safari. The packaging is wonderful. It makes me feel elegant and confident without being too overpowering. I started using it after I went on a safari trip and it brings back memories of that holiday. I go for strong, musky orientals - I can't wear anything that's green or flowery.

Myra De Turbeville, 51, secretary at German machinery parts company



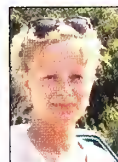
Star sign: Capricorn
My all time favourite is Christian Dior's Diorescence, with Miss Dior coming a close second. I like Diorescence because the scent remains constant. It doesn't change throughout the day like some can do. It makes me smell fresh and clean. I'm not keen on musky or flowery perfumes.

Dee Collins, 34, sub-editor on electronics magazine
Star sign: Leo



The only perfume I wear is Salvador Dali, which I've been using for about four years now. I first came across it as a sample on a magazine and instantly liked it. It has a sophisticated image and is not too sweet or flowery. I find many perfumes make me feel headachy - this one doesn't and that's why I've stuck with it.

Sharon Worsley, 26, mother



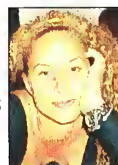
Star sign: Capricorn
I have several perfumes but my favourite at the moment is Coco. I first smelt it on a friend and liked it. I use it for both day and evening and feel more sophisticated when I'm wearing it. Others I like include Eternity, Givenchy, Dune and Opium, which I alternate between depending on my mood and the occasion.

Annabel Adamson, 28, solicitor
Star sign: Aquarius



My favourite perfume is New West, which I discovered through a free sample. I like its fresh, clean scent and feel more sociable when I'm wearing it. I also like Amarige and Anais Anais, and vary between them depending on how I'm feeling.

Julie Hobbs, 20, receptionist at publishing company
Star sign: Aries



I've got two favourites at the moment, Escape and Coco. Escape is good for daytime use. I think it's catchy and modern and the guys like it too! I feel more confident when I wear it. Coco I wear for an evening out. I like the fruity, spicy smell.

Sue Broomhead, 53, owner of perfumery shop
Star sign: Sagittarius



Because of my job I get to try out all the new fragrances, but my own favourite is Rive Gauche. When I first started wearing it, it was very new and modern. I suppose it's a bit more middle-aged now. I like it as it's not too heavy and because it suits me. Others I like include Chanel No5, Champagne, Obsession and L'Air du Temps

Shona MacDonald, 20, philosophy student
Star sign: Pisces
My favourite is Chanel aftershave.

I prefer masculine scents so I tend to go for men's fragrances. I like Chanel because it's fresh, crisp and clean. It reminds me of Spring. Others I wear include a Crabtree & Evelyn aftershave, Dune, Oscar de la Renta, Laguna and Chanel 19.



An agony aunt's postbag is always brimming with desperate letters from acne sufferers who hide their faces in embarrassment, letting the condition ruin their social lives and jobs. Some sufferers even contemplate suicide.

It's not surprising that acne can reduce self confidence to zero. The many myths surrounding the condition encourage sufferers to blame themselves, believing that acne is a punishment for eating too much junk food or not washing enough. Even worse, many are not given the right treatment or don't use it properly — and when they can't see an instant

- Make sure your customers are happy with their treatment. Ask if they prefer a gel, cream or lotion. Would they rather use a cleanser with or without water? And do they like using soap or liquid? For travelling, cleansing pads are especially convenient, or recommend products in tubes or plastic bottles.

- Remember that treatments should be applied to the whole of the affected area, not just to actual spots. This means all over the face and, if appropriate, the neck, back, shoulders and chest too. This will help to reduce the formation of new spots.

- Acne sufferers may appreciate advice on related problems.

Make-up can boost self-confidence, but plastering on thick, heavy foundation will only make matters worse. Recommend a foundation that is light, non-greasy and non-comedogenic (should not cause blackheads). Skin-tinted treatments are another option. When choosing a moisturiser, gels or light lotions are best for greasy skins. Advise frequent washing with a mild shampoo if greasy hair is a problem.

- Choosing products will be less confusing if you recommend a spot treatment and cleanser from the same brand.

- Make sure customers know about possible side effects — for example, red irritated skin with benzoyl peroxide.

- Encourage them to read packs thoroughly before use and follow instructions carefully.

- Discourage customers from picking or squeezing spots — it'll only make them worse and can lead to permanent scarring. If they must, recommend a comedone spoon.

- Encourage customers to persevere with their treatment, but if it has no effect after a month or so, advise them to see their GP.

- Be tactful!

All pictures courtesy of Zyma's Savlon Dry Skin



DEEP

Spots and acne affect about 80 per cent of us at some time, but with all the treatments available there's no reason why anyone should suffer in silence.

Jacqui Brommel MRPharmS looks at the condition and how it can be tackled most effectively

improvement, they're plunged deeper into a spiral of despair. The good news is that acne is very treatable — if it's treated properly.

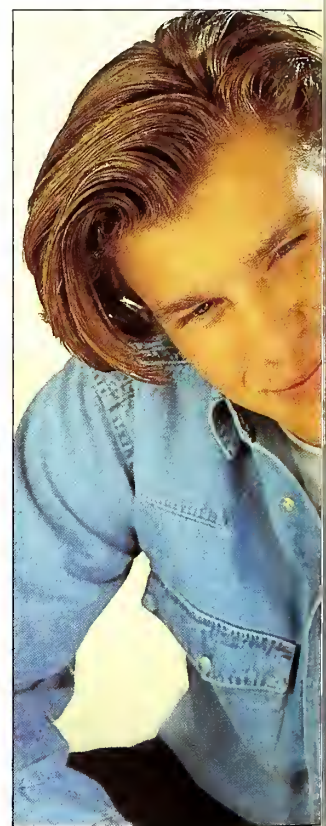
Acne vulgaris is the most common form of acne and affects mainly teenagers, reaching a peak in women aged 16-17 and men 17-19. It is linked to the hormonal changes occurring at puberty, and occurs when the skin becomes extra-sensitive to the hormone testosterone. These

hormonal changes cause the pilosebaceous glands in the skin to become hyperactive. The glands pour out excess sebum, a greasy material, onto the skin making it appear shiny while the hair often looks lank and greasy.

This alone does not cause acne. But when the cells lining the pilosebaceous follicle go into overdrive, multiplying rapidly and becoming sticky, they form a "plug", trapping sebum within the follicle. This plug

appears as a blackhead (open comedone) or whitehead (closed comedone) — on the skin's surface.

It's then that the real problems can start. As sebum builds up under the skin, the blocked follicle becomes the perfect breeding ground for bacteria which break down the sebum into fatty acids that spark off inflammation and irritation. Before long the comedones can become so inflamed that they form nasty pus-filled spots or deeper, disfiguring lesions that can spread, sometimes joining together to form unsightly cysts. Severe cases can lead to permanent scarring.



Acne is graded as either mild, moderate or severe, depending on the amount and severity of these symptoms. It thrives in areas where there are plenty of pilosebaceous glands such as the face, neck, shoulders and upper back and chest.

How to treat

Treatment depends on the severity of the acne. The occasional outbreak of spots or mild to moderate acne can be treated with OTC products, although moderate acne may require a visit to the GP if this is unsuccessful. Sufferers with severe acne should see their GP straight away.

There are so many topical
Continued on p12▶

THE E45 ASSETS

ARE NOW MORE LIQUID



The arrival of new Lotion E45 last April has added a lighter touch to the E45 range. But there's nothing light about the assault the new product has mounted on the therapeutic moisturiser market.

Supported by £1,000,000 in consumer advertising, Lotion E45 already holds a 6% share¹.

Even more important than advertising is the quality of the product itself, which makes it a valuable adjunct to Cream E45.

It's in recognition of this quality that Lotion E45 was voted Best New Bodycare Product².

So make sure you stock new Lotion E45 – for those customers who prefer their E45 assets to be more liquid.



NEW LOTION E45 ESSENTIAL MOISTURE REPLACEMENT

Continued from p 10

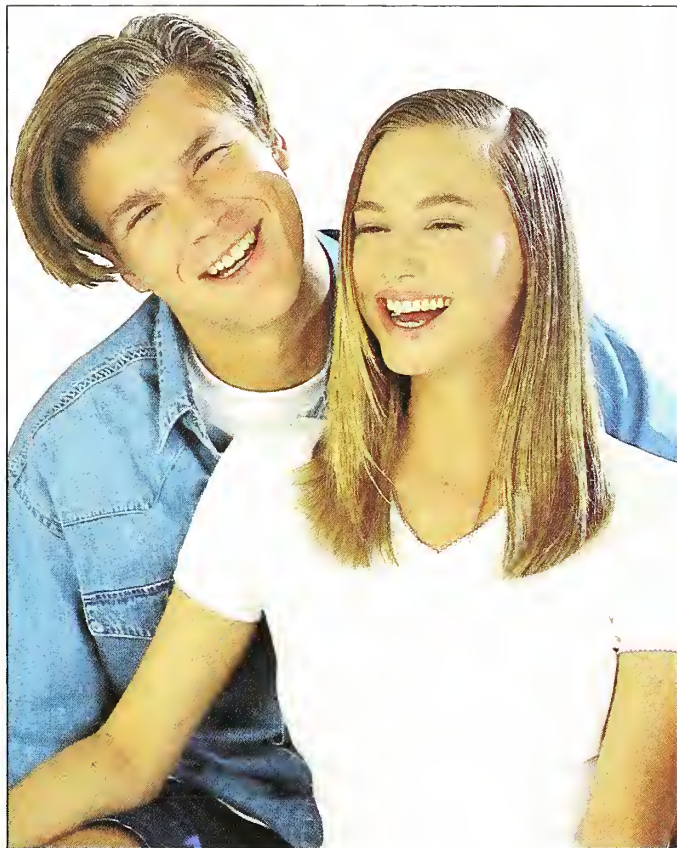
OTC formulas to tackle spots and acne that the average customer is likely to get totally confused! To simplify matters, remember that the ingredients in OTC products are either keratolytics or antibacterials.

● **Keratolytics** are abrasive and work by unblocking the pilosebaceous follicles. The most common, and one of the most effective, is benzoyl peroxide, which also helps to kill bacteria within the follicles. It's available in 2.5 per cent, 5 per cent and 10 per cent strengths. It's best to start with 5 per cent, or

(Oxyclean Facial Wash) and potassium hydroxyquinoline sulphate.

Some products combine a keratolytic and an antibacterial. Quinoderm contains benzoyl peroxide and potassium hydroxyquinoline sulphate, while Clearasil Medicated Cream contains triclosan and sulphur.

Spot treatments — creams, gels or lotions — can be used together with cleansers especially for spot-prone skin. Acne is not caused by dirt or poor hygiene, but it makes sense to keep the skin clean by washing



2.5 per cent if the skin is sensitive. Like other keratolytics, benzoyl peroxide can cause skin irritation, redness and peeling. This usually settles with time, but customers should see their GP if the reaction is severe or persistent. Benzoyl peroxide can also bleach fabrics. Products containing benzoyl peroxide include Oxy 5 and 10, Panoxyl, Ultra Clearasil, Acetoxyl, Acnegel and Benoxyl.

Other keratolytics include salicylic acid (Clearasil Medicated Gel, Oxy Medicated Cream) and sulphur.

● **Antibacterials** help to reduce the number of bacteria on the skin surface. Popular ones are chlorhexidine gluconate (Cepton), triclosan

morning and evening, and drying with a clean towel. There's no need to wash more often. There are many cleansers to choose from — soaps, liquid washes and cleansing pads. They usually contain a detergent or alcohol to cut through grease on the skin's surface, and many also contain an antibacterial or keratolytic.

The next stage

If your customers has tried OTC treatments with no success, encourage them — tactfully — to see their GP. It is important that acne is treated as soon as possible, before it gets worse. There are plenty of products available on prescription. These include topical or oral antibiotics and topical vitamin A derivatives which work by unblocking the

True or false?

● Acne affects more men than women

False

Both men and women produce the "male" hormone testosterone, which can trigger acne. Acne affects both sexes equally, though it can be more severe in men.

● Acne only occurs in teenagers

False

Acne is most common in teenagers, but it can persist long after puberty. Some sufferers don't get acne until their mid 20s — or even their 40s.

● Some drugs can cause acne

True

Drug-induced acne can be caused by steroids including corticosteroids, anabolic steroids, and progesterones in the contraceptive pill.

● Sugary and greasy foods like chocolate and chips can cause acne

False

There's no proven link between diet and acne — but that's no excuse to pig out on junk food! A balanced diet with plenty of fresh fruit and vegetables is essential for good health, and helps to keep skin healthy and glowing.

● Stress can make acne worse

True

But this is probably because stress makes you pick at spots which can aggravate acne.

● You'll get acne if you don't wash properly

False

Acne has nothing to do with dirt, although it is important to wash regularly to cut down grease and keep the skin clean.

● Acne can get worse before a period

True

Many women find that their acne flares up just before they get their period.

● Some cosmetics can cause acne

True

Some extra-greasy ointments, hair preparations and cosmetics are believed to encourage the formation of blackheads and are said to be "comedogenic".

● Acne is hereditary

True

Acne does tend to run in families, although anyone can suffer.

● Acne always leaves deep, pitted scars

False

Scarring is usually only seen in the most severe acne and with modern treatments many of these cases should be avoided in the future.

● Acne is contagious

False!

follicles. Anti-androgen tablets (Dianette) counteract the effects of testosterone on the skin, reducing the amount of sebum. In extreme cases, oral isotretinoin (Roaccutane) may be given under hospital supervision.

Most acne sufferers are advised to use a topical treatment which can be combined with a course of oral treatment if necessary. Finding an effective treatment — or combination — is often a matter of trial and error as sufferers respond differently.

Whatever treatment a customer is using, encourage them to persevere. Treatment usually fails because it is not used regularly or for long enough so it is vital to follow the manufacturer's instructions.

Unfortunately there is no instant cure and weeks or months can pass before an improvement is seen. Even then, regular treatment is usually necessary to keep acne under control.

All in all, a large helping of patience is required to tackle acne successfully. Luckily many cases clear up around the mid 20s. But with the correct approach, there is every chance that your customers will not have to wait that long to see an improvement.

Self help

For further information on acne, send an sae to:
Acne Support Group
16 Dufors Place
Broadwick Street
London W1 1FE

Washing is now an important part of dry skin care.



Soap and detergent-based cleansers all have a drying effect on the skin. (A good rule of thumb: if it foams, it's drying.)

So your customers who have a dry, sensitive and irritated skin should replace soap with Wash E45. This non-drying washing cream is an effective cleanser containing no soap, detergent, perfume or other potential sensitisers. It gently cleanses with water – but without stripping away the skin's natural protective barrier of oils – and leaves the skin soft and comfortable.

Trials demonstrate the superior efficacy of Wash E45. They show that it's non-drying, unlike other specialist cleansers and soaps for dry skin^{1,2,3}. A clinical trial also demonstrated that Wash E45 is more acceptable to patients than Emulsifying Ointment⁴.

Not only is Wash E45 effective, it's also versatile. It can be used on the face or the whole body when bathing, showering or just washing; but it's especially good for hands as they are washed more often. Available on FP10 or OTC, Wash E45 can be recommended for washing dry skin conditions, including eczema, dermatitis and psoriasis.



ESSENTIAL CLEANSING THERAPY FOR DRY SKIN

References: 1. Data on file, Crookes Healthcare Limited, Report No. M89076 2. Data on file, Crookes Healthcare Limited, Report No. CPD 184 3. Data on File, Crookes Healthcare Limited, Report No. CPD 186 4. Data on file, Crookes Healthcare Limited, Report No. CPD 187.

For detailed information on Wash E45 and the full range of E45 products, contact: Crookes Healthcare Limited, Nottingham NG7 2LJ.

What turns normally pleasant women into monsters, confident creatures into quivering wrecks and makes healthy women take to their beds in pain and distress? Yes, you guessed — it's that time of the month. Zita Thornton takes a look at how to cope

It's a very lucky woman who escapes completely from period problems throughout her life. While not all of us admit to going on the warpath once a month, mood swings can affect even the most composed person, and that's before we start thinking about period pain.

Not all problems are necessarily confined to the few days of actual bleeding once a month. It has been estimated that 40 per cent of women suffer immediately prior to menstruation. They are the ones who have to contend with pre-menstrual syndrome, or PMS, as it is called.

No one knows what actually causes PMS, although changes in hormone levels seem to play a role. Even its symptoms are diverse and there is no single cure. What provides relief for one woman may not work for another.

One pattern has been established, PMS occurs up to 14 days before a period

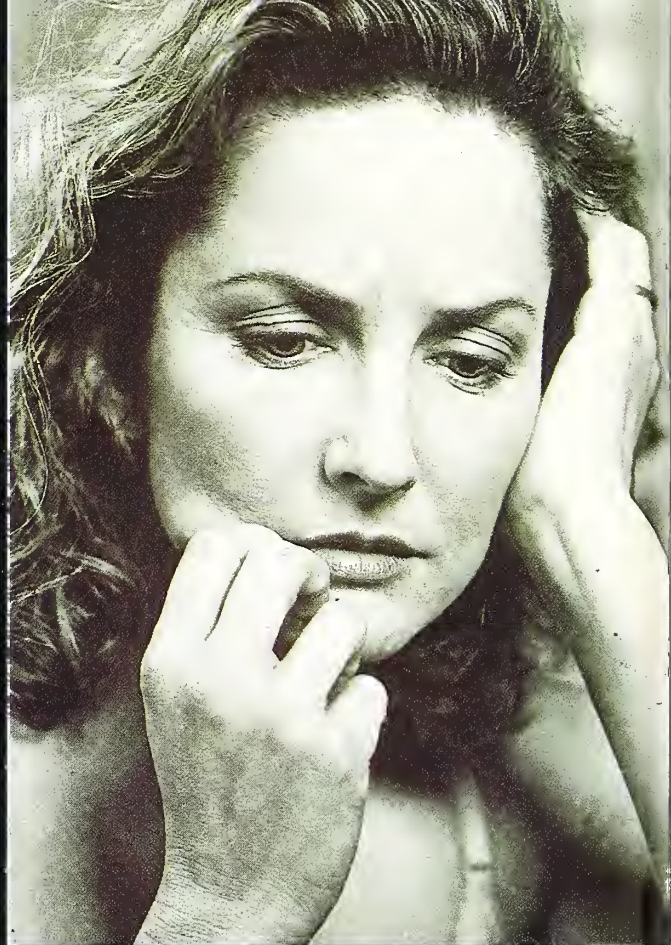
and there is a complete absence of symptoms for at least seven days afterwards.

There isn't a test which can be carried out to confirm a diagnosis of PMS, so the most reliable way of finding out is to keep a chart, such as that supplied by the National Association for Premenstrual Syndrome (NAPS), on which you mark down symptoms and when they occur. This is done for two or three cycles.

Dietary solution

According to NAPS, diet plays an important part in bringing relief from PMS. They suggest eating high-fibre carbohydrates, little and often.

In healthy people, when the blood-sugar level falls, adrenalin is released causing glycogen, stored in the liver, to be converted back to sugar. In PMS sufferers, that level seems to be set higher, causing adrenalin to be released earlier. This results in some of the emotional effects, such as anxiety and bad temper.



It's that time of the month

NAPS recommends that you eat breakfast within half an hour of waking, two more main meals during the day and three high-fibre snacks, such as digestive

biscuits, or a bowl of cereal, in between.

If you are going to exercise or be more energetic than usual, you should increase your carbohydrate intake. PMS sufferers should also cut down on alcohol, caffeine and salt.

Vitamin B6 supplements have been linked to PMS relief. Trials carried out over ten years ago demonstrated that 21 out of 25 PMS sufferers who took extra vitamin B6 showed a significant improvement. However, more recent studies show that it is easy to overdose on self-administered B6 supplements. Doses as low as 25mg a day can cause pins and needles, numbness and muscle weakness.

Evening primrose oil (EPO) is perhaps the

supplement that is most commonly linked to relief of PMS. However, clinical studies into its efficacy show conflicting results.

In March, 1993, a small study of 27 women revealed that EPO had no significant effect. However, six previous studies of 324 women showed a definite improvement in their condition.

According to NAPS, some women do find taking EPO helpful, but the effect usually isn't permanent, even when they continue to take supplements. Having said that, some women say that taking this supplement has changed their life and, as there are no side-effects, it seems worth trying even if the results are only temporary.

The treatment is said to
Continued on p16

Periods needn't be a misery

There are a number of steps you can take to help you to cope with monthly problems:

- Place a hot water bottle on the site of the pain
- Relax in a warm bath
- Take regular exercise
- Practise relaxation techniques
- Eat well, including high-fibre foods and those high in potassium, such as ripe bananas and peanuts, and high-calcium dairy products
- Cut down on salt intake to reduce fluid retention
- Plan important events after, rather than before, a period
- Rest more in the fortnight before a period
- Explain how you feel to family members and work colleagues so that they can understand the reason for any mood swings you may have
- It helps to talk to others who are suffering in the same way. Join the National Association for Premenstrual Syndrome (☎ 0732 741709).

Just how big a headache is Tension Headache?

The biggest. In fact, 74% of all headaches are Tension Headaches.⁽¹⁾ Which, when you think about the pressure people are under today, makes sense.

What also makes sense, is recommend a *specific* Tension headache remedy straight away, and the one to recommend is Syndol.

There is no more effective OTC treatment for your patients. Uniquely formulated for Tension headache, Syndol contains the powerful analgesic combination of Paracetamol, Codeine and Caffeine, plus Doxylamine Succinate to ease muscle tension and bring fast relief (clinical study showed that in 97% of Tension Headache attacks, Syndol started to work within 30 minutes).

It is a Pharmacy medicine, is strongly supported, creates extraordinary loyalty, and powerful word of mouth recommendation.

Get the benefit. Display well, recommend at once, and above all don't get caught out of stock. That's a headache you could do without.



You can't recommend more powerful relief.

(1) National Headache Survey, Gallup 1993

INFORMATION FOR PHARMACISTS: Each tablet contains Paracetamol BP 450mg, Codeine Phosphate BP 10mg, Doxylamine Succinate USNF 5mg, Caffeine BP 30mg. **USES:** Treatment of mild to moderate pain and as an antipyretic. Symptomatic relief of headache, including muscle contraction or tension headache, migraine, neuralgia, toothache, sore throat, dysmenorrhoea, muscular and rheumatic aches and pains and post-operative analgesia following surgical or dental procedures. **DOSAGE AND ADMINISTRATION:** Adults and children over 12 years 1 or 2 tablets every 4-6 hours as needed. Maximum 8 tablets in 24 hours. Not recommended in children under 12 years. **CONTRA-INDICATIONS, WARNINGS ETC.:** Contra-indications: Idiosyncrasy to any of the ingredients. Precautions: May cause drowsiness. If affected, do not drive or operate machinery. No data available in pregnancy: avoid use. Side-effects: Drowsiness or lizziness, mild constipation, agranulocytosis rarely. Overdose: Paracetamol overdose can cause liver and kidney necrosis. Immediate medical referral is essential. **LEGAL CATEGORY:** P CD (Section 5) (not prescribable under NHS). **PRODUCT LICENCE NUMBER:** PL4425/0018. **PACKAGE QUANTITIES, PRICE:** Pack of 10 tablets £1.59. 20 tablets £2.77. 50 tablets £6.08. **DATE OF PREPARATION:** September 1993. Full prescribing information is available from licence holder: Marion Merrell Dow Limited, Lakeside House, Stockley Park, Uxbridge, Middlesex UB11 1BE.



Some women swear by evening primrose oil for PMS

Continued from p14

be most effective in relieving breast pain which is associated with a low level of prostaglandins. EPO is a rich source of gamma linolenic acid (GLA) which helps the conversion of prostaglandins, boosting levels in the body and perhaps avoiding the problem.

Starflower oil contains even higher levels of GLA, so it can be taken instead.

Patience is necessary when trying this treatment as the effect will take at least three months to develop because it relies on changing the cell membrane

structure of pain receptors.

If the symptoms are severe and do not subside with dietary changes or EPO, hormonal treatment may be necessary. Progesterone suppositories or injections are prescribed and are supervised by a doctor as the dose needed by individuals varies.

A real pain

Monthly periods haven't been given the nickname "the curse" for nothing. The majority of women suffer at some time or other from problems ranging from excessive bleeding to severe, debilitating cramps.

The varied face of PMS

There are over 150 different symptoms of PMS which can effect a woman both physically and psychologically. Some of the most common include:

- Headaches
- Sore breasts
- Tiredness
- Backache
- Stomach cramps
- Increased allergic reactions
- Sinus problems
- Bloating
- Clumsiness
- Irritability
- Panic attacks
- Moodiness
- Poor concentration
- Mental confusion
- Depression
- Aggressiveness
- Binge-eating
- Craving sweet things
- Weepiness

Fortunately for many, it is possible to gain some relief.

Dysmenorrhoea, to give period pains their proper name, occurs most often between the ages of 15 and 30. Pains later in life are more often associated with PMS or an underlying cause, such as endometriosis, pelvic inflammatory disease or fibroids.

Period pains usually occur during the first couple of days of menstruation or a few hours before. The pain is normally spasmodic, but can be severe enough to keep the sufferer in bed. Sometimes pain is felt during the days leading up to a period. Pain can occur throughout the abdominal region and even extend to the upper thighs and lower back. Headaches are common, as is nausea and faintness.

The symptoms are due to a high level of prostaglandins in the tissues so the best relief comes from a prostaglandin inhibitor such as ibuprofen, which is available over the counter, or the prescription product mefenamic acid.

These are effective in reducing pain and menstrual flow by 25 per cent. It is recommended that half the dosage be taken before the pain is expected to start, increasing to a full dose at the onset of pain.

Other treatments include:

- Taking an oestrogen/progesterone pill to suppress ovulation
- Good nutrition to help eliminate some of the problems. A high-fibre diet helps avoid the constipation which can also occur at this

time of the cycle

• Calcium and magnesium supplements in a ratio of 2:1 (eg 500mg calcium, 250mg magnesium) have helped some sufferers.

Other problems

Particularly heavy bleeding can happen in between normal periods, as well as during a period. If there is no apparent cause, such as polyps or fibroids, this is called dysfunctional bleeding. Most likely to happen after the age of 35, it can leave the sufferer feeling drained and exhausted, and cause considerable inconvenience.

Conventional treatment consists of prescribing the contraceptive pill or prostaglandin inhibitors. Sometimes a D&C is advised where the lining of the uterus is scraped out.

Endometriosis is a major cause of pain during menstruation and before. In this condition, small pieces of the lining of the womb migrate to elsewhere in the pelvic cavity. These pieces of tissue continue to react to hormones and eventually blood-filled cysts develop. The result is painful periods and, as scar tissue builds up, persistent pain.

Treatment is either by surgery or strong progestogens to stop normal cyclical changes.

Magnesium may help PMS

The vitamin-mineral supplement Magnesium-OK is a "valuable first line treatment for pre-menstrual syndrome", according to a study in the *British Journal of Clinical Research*.

More than 200 women, aged 18-50, took part in the study, carried out on behalf of The Premenstrual Society. They kept daily records of PMS symptoms for three cycles.

In all, 70 per cent of women experienced good to excellent responses to a variety of individual PMS symptoms including breast discomfort. Other symptoms reported to have eased included abdominal bloating, depression, irritability, anxiety, clumsiness, tiredness, headaches, food cravings and skin complaints.

Sufferers of PMS have been found to have low levels of red blood cell magnesium and defects in fatty acid metabolism.

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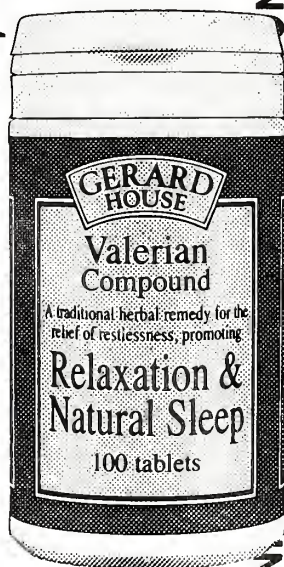
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Karvol relieves children's nasal congestion and allows them to breathe easily throughout the night. And there's no need to wake them up, because with Karvol there's nothing to swallow or rub onto a child's chest.

Parents simply dab the pre-measured capsule dose on a handkerchief tied to the cot, and the natural vapours of pine, menthol and

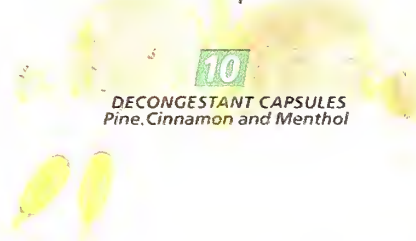
cinnamon effectively relieve blocked noses and stuffy colds. That means a good night's sleep for children and their parents – and explains why Karvol is the most recommended nasal decongestant.

So, considering Karvol's gentle efficacy and ease of use, it's a natural recommendation for children. And their parents.

Easier breathing for an undisturbed night's sleep

Karvol

Natural vapours to clear
blocked up noses



10

DECONGESTANT CAPSULES
Pine, Cinnamon and Menthol



PRODUCT INFORMATION: Presentation: Gelatin capsules containing an oil containing as active ingredients, Levomenthol Ph Eur 35.55mg, Chlorbutol B P 2.25mg, Terpineol B P 66.6mg, Thymol B P 3.15mg, Purolo Pine Oil B P 196.0mg, Pine Oil Sylvestris 9mg. Uses: For the symptomatic relief of nasal congestion and colds in the head. Dosage and Administration: Adults and children over 3 months, carefully sprinkle the contents onto bedding or material, avoiding the possibility of skin contact. Alternatively, add to a pint of hot water and inhale vapour freely. Contra-indications, Warnings, etc.: Karvol should not be used by patients who are sensitive to any of the ingredients. Not recommended for children under 3 months of age. Avoid contact with eyes and prolonged contact with the skin. Do not take internally. Package Quantities: Packs containing 10 or 20 capsules. RSP: Capsules 10s £1.65, Capsules 20s £3.05. Product Licence No. PL 0327/5914. Crookes Healthcare Ltd, Nottingham NG2 3AA.



Coping with the change

Far from being seen as the end of a woman's active, "useful" life, attitudes towards the menopause are changing, but not fast enough, as Jane Feely explains

These days you can't pick up a women's magazine without reading something about the menopause, particularly in relation to hormone replacement therapy, which you could be forgiven for thinking holds the answer to eternal youth.

As in so many areas of women's health, a new openness has led to a glut of information about the menopause. In theory, at least, it is becoming acceptable for women to admit that they're going through "the change".

So you'd think with all this information that today's woman would know all about the menopause and what to expect from the moment her periods cease. But you'd be wrong.

A survey by Wyeth Laboratories found that the majority of women endure distressing symptoms for at least nine months before consulting a doctor, and one in five waits over 18 months!

"Why?", you may ask. The answer is that three-quarters of the women in the survey didn't realise they were going through the

menopause and one in four thought the symptoms would simply go away.

There's no doubt that women today are more likely to ask for help with the menopause than their ancestors, but we still have some way to go on the education front.

Oestrogen drop

The menopause has been dogged by Jekyll and Hyde images in the past and, with its association with the end to fertility, it's easy to see why myths persist about this time in a woman's life. So let's put the record straight.

The term "menopause" refers specifically to the end of menstruation. While this is the most obvious sign that a woman has reached this stage in her life, the absence of periods is just one effect of the hormonal changes taking place in her body.

The hormones in question are oestrogen and progesterone. Throughout a woman's life, these are responsible for many changes such as puberty and the monthly menstrual cycle.

They are produced by the

ovaries, but ovaries have a limited life-span and around the time of the menopause, production of the hormones begins to slow down and eventually stops.

This drop in levels, particularly of oestrogen, is thought to be the root cause of all menopausal symptoms.

Not all women experience the menopause at the same age. It can happen in the early 40s or as late as 53 or 54 years of age. The average age is 51.

There is also variation in the symptoms experienced. Some women, but very few, seem to sail through it all with no problems. The majority suffer one or more of the following, to varying degrees:

- hot flushes or night sweats
- vaginal dryness
- changes to skin and hair
- insomnia or tiredness
- psychological symptoms such as mood changes, anxiety, panic attacks and irritability.

As oestrogen levels begin to fall, a woman will notice that her periods become less predictable — lighter and less frequent or even heavier

and more frequent.

One of the most common menopausal symptoms experienced is hot flushes. Figures suggest that four out of five women get a flush at some stage. In 70 per cent of these cases, flushes occur at least daily and in one woman in five, they persist for more than five years!

Body overheating

Hot flushes occur when the brain thinks the body has overheated and tries to cool it down. Blood vessels in the skin dilate, bringing the blood closer to the surface, allowing heat to evaporate. This accounts for the red, flushed look. Sweating is another way the body tries to cool down.

It's not clear why the body thinks it is overheating, but it is known to be due to low oestrogen levels.

Vaginal dryness and itching, leading to discomfort during intercourse, is another effect of the fall in oestrogen levels.

Oestrogen is responsible, among other things, for keeping the vagina lubricated. Once the

hormone levels fall, this lubrication stops and the vagina becomes prone to dryness, soreness, itching, bleeding after intercourse and infections.

Visible signs

One of the most visible signs of the menopause is changes to the hair, skin and nails.

The former becomes noticeably dryer and nails more brittle. These changes are due to the loss of collagen, the supporting structure found in skin, hair and muscles. Again this can be blamed on less oestrogen.

Psychological changes are perhaps the most difficult to explain. But as medicine's understanding of conditions like pre-menstrual syndrome and post-natal depression improves, it seems likely that these mood swings are a result of reduced oestrogen.

Symptoms can include:

- depression
- irritability
- loss of energy
- loss of confidence
- poor memory
- panic attacks
- agoraphobia.

What's the answer?

What with hot flushes, insomnia, mood swings and vaginal dryness, the menopause is no laughing matter, and the symptoms can go on for years.

But sufferers needn't put up with the misery in silence. There are a number of treatment options and the most appropriate method will depend on the severity of the symptoms, the woman's general health and personal preference.

The one treatment that everyone talks about in relation to the menopause is hormone replacement therapy (HRT). This replaces the oestrogen and progesterone that are lost during the menopause.

There are two main types of HRT — unopposed therapy where oestrogen is given alone, and opposed therapy where both oestrogen and progesterone are given. Which form is used depends on whether the woman has had a hysterectomy or not.

Early forms of HRT used oestrogen alone and were linked with an increased risk of developing cancer of the endometrium, the lining of the womb. Doctors discovered that by giving a supplement of progesterone, for 12 days each month, this risk was removed.

So if the woman has not had a hysterectomy, she will take opposed or combination

The menopause's lasting legacy

Given time, hot flushes will cease and mood swings and panic attacks become less of a problem but, unfortunately, that's not the end of it. The menopause leaves behind a nasty legacy that affects a woman's health for the rest of her life.

Doctors now believe that not only does a fall in oestrogen levels cause the menopausal symptoms we've been talking about, but that oestrogen itself has a protective effect on a woman's health. Once the hormone has gone, these protective benefits go, too.

There are two main areas where this is most noticeable:

• **Osteoporosis** is a condition where the bones get lighter and weaker with age. As a result, the person becomes more prone to broken bones. Every year there are around 46,000 hip fractures in England and Wales alone.

During our childhood, teens and 20s our bones are built up but, after our 30s, this process is reversed and our bones gradually become less dense. In women, this process is accelerated once they reach the menopause and by the time they reach 70, they will have lost half their total skeleton. Men, on the other hand, lose only a quarter by the time they reach 90.

The loss of oestrogen during the menopause is thought to trigger this rapid loss of bone.

• **Cardiovascular disease** is the major cause of death in the Western world. In Scotland, for example, more than one death in three is due to a heart attack and one in ten due to strokes.

If you look at the incidence of heart disease in people aged 45 and under, men have rates of suffering several times higher than women. But once a woman reaches the menopause, it's a different story. In the age group 55-65 years, the ratio of men to women with heart disease is around 2:1 and by the time a woman reaches 75 she is just as likely to suffer from heart disease as a man of the same age.

Scientists have suggested that women under 45 or so are "protected" from the dangers of heart disease, in a way that men are not. Once again, oestrogen is thought to be the answer.

'At first I was too busy to notice. I was working hard at my job and planning my daughter's wedding. But soon it got to the point where I couldn't fail to notice the changes. The hot flushes, day and even worse at night, the sleeplessness, the crankiness. I'd get my period when I least expected it and even my skin seemed to change. Finally, I decided that I couldn't stand the misery for another minute, so I went to my doctor. He told me what was happening, it was the change of life. Maybe I shouldn't have been shocked — I was 49 years old — but I was'

Taken from a Wyeth patient information leaflet

therapy. If she has had a hysterectomy, oestrogen is given alone.

There are many different ways of taking HRT with tablets being the most popular. Other forms include implants, transdermal patches and vaginal creams or pessaries.

HRT does have its side-effects and these, plus unrealistic expectations about therapy, are thought to be the main reasons why some women don't continue with therapy.

A woman on opposed HRT will experience a return to monthly bleeding and some women find this unacceptable. Others are not prepared for the fact that HRT takes time to work. They're not going to wake

up the next morning looking like Joan Collins and feeling 20 years younger.

Common side-effects include breast tenderness, nausea, leg cramps, weight gain, depression and headache.

Much controversy has raged over possible links between HRT and cancer. Data relating to HRT and breast cancer is conflicting. Some studies have shown an increased risk, others show a decreased risk and many show no significant difference at all. The decision is best made by weighing up the risks against the benefits for each individual.

There are some women for whom HRT is not recommended, while others

do not feel happy with the idea of taking hormones in whatever form. What are their options?

Tibolone (Livial), only available on prescription, is a synthetic hormone which can bring relief from symptoms like flushing, as can clonidine (Dixarit). There is a range of products such as calcium supplements which reduce the risk of osteoporosis (see box left).

The idea of using nutritional supplements to help the menopause has its followers and vitamins E and C, selenium and magnesium have been suggested.

Complementary role

If homoeopathy is the preferred option, there is a range of products which can be recommended, including nux vomica, ignatia, sepia and sulphur. Any woman wanting to try these products should be advised to visit a qualified homoeopathic doctor.

Aromatherapy is gaining in popularity to help women cope with the menopause. It uses essential oils which can be massaged into the body, added to bath water or inhaled as a room fragrance. For menopausal symptoms, recommended oils include chamomile, clary sage, cypress, geranium, lavender and sandalwood.

Relaxation techniques such as yoga or meditation can help relieve many aspects of stressful living.

Some women find it helps to talk to someone. It's reassuring to know that you're not the first to feel a certain way and you certainly won't be the last. Some doctor's surgeries or charities organise such groups. Why not make some enquiries so that you can pass on the details to any of your customers who ask? It may be just what they need.



Contraception and misconceptions

We all know that the stereotypical condom buyer lurks in a corner of the pharmacy before furtively slipping a three-pack of Durex in with the rest of his/her shopping. Or do we?

In the recent past, such scenes may have been common but, nowadays, this image doesn't hold true. The advent of AIDS has meant talking about contraception is no longer taboo and buying a three-pack is now a responsible, socially-acceptable decision.

Most women visit their GP or family planning clinic for contraceptive advice, but there may be times when you are asked how to use a particular product, or the risk of any side-effects.

Barrier benefits

Methods bought over the counter are mainly barrier contraceptives which act as they sound: they place a barrier between the sperm and the egg, preventing any fertilisation.

• Condoms

The latest Durex report says that condoms are the most commonly-used method of contraception in the UK and more than 50 per cent of the total is sold through pharmacies.

Male condoms come in a range of types from basic to flavoured. They can be lubricated with either silicone or nonoxynol-9. The latter is said to kill the HIV virus.

The only side-effects may be an allergic reaction to the latex or spermicide used, although hypo-allergenic versions are available.

The female condom has been with us for almost 18 months, but does not appear to have been a runaway success. This may be because it is seen as being "too pricy" or complicated and off-putting to insert.

• Diaphragm or cap

These are inserted into the vagina, covering the cervix. They must always be used with spermicides. A range of sizes and types are available, so they must be fitted by a GP or family planning nurse.

Diaphragms are dome-shaped, thin, soft latex

With the variety of contraceptive products available, it's easy for consumers to get confused. What methods can be bought over the counter, and how effective are they?
Marianne Mac Donald reports



rubber with a flexible outer ring covered by rubber. They fit behind the pubic bone and cover the cervix.

Caps are smaller than diaphragms and fit directly over the cervix where they are held in place through

suction and by support from the vaginal wall.

Both can be inserted any time before intercourse and must be left in place for at least six hours afterwards. They should not be left in the vagina for longer than 30

Papaya planning

Recent research from Sussex University has revealed the contraceptive activity of papaya fruit. Strange as it sounds, eating papaya prevents pregnancy.

The fruit contains an enzyme, papain, which attacks the hormone progesterone. This usually prepares the womb and helps maintain pregnancy. Papain becomes more active in the bloodstream and even more effective against progesterone.

It's not known how much fruit has to be eaten for it to be effective, but we may discover that a papaya a day keeps the baby away!

hours as this increases the risk of developing toxic shock syndrome. Other side-effects include irritation and an increased risk of cystitis and urinary tract infection in some women.

It is possible that a customer may lose, damage or forget her diaphragm or cap and need a replacement. In theory, they can be bought over the counter, provided the size and type is known, but in practice this is unlikely.

• Contraceptive sponge

The one-size sponge is made of polyurethane foam and acts by carrying the spermicide nonoxynol-9 and absorbing semen.

Before use, the sponge must be moistened with water to activate the spermicide. It is then placed over the cervix and, like caps and diaphragms, remains in place for at least six hours after intercourse. It should not be left inside the body for longer than 30 hours and cannot be used during a period.

• Spermicides

These should only be used with a barrier method and not on their own.

On prescription

Prescription contraceptives are generally more effective against pregnancy than those that can be bought over the counter. But they also cause more serious side-effects and are not always suitable, or

Who uses what and how well does it work?

Method	Effectiveness (%)	Popularity (%)
Male condom	85-98	16
Female condom	85-98	not known
Diaphragm/cap	85-98	1
Vaginal sponge	75-91	not known
Combined pill	93-98	16
Progestogen pill	96-99	5
Injection	almost 100	1
IUD	97-99	5
Norplant	98-99	not known
Sterilisation	almost 100	25

ceptable, for all couples.

The pill
The pill is available in two forms: the combined oral contraceptive and the progestogen-only.

The combined variety contains synthetic oestrogen and progestogen. They ramp down the release of certain hormones which cause ovulation. They also make the endometrium less suitable for pregnancy and thicken the cervical mucus making it more difficult for sperm to swim through.

Progestogen-only pills (POP) don't contain oestrogen. They are not as effective as combined pills and do not always prevent ovulation. Instead they act on the cervical mucus, endometrium and fallopian tubes making it difficult for sperm to travel.

Injectables

These work in the same way as the progestogen-only pill and are given by intra-muscular injection. Their main advantage is that they are effective for up to three months.

IUDs

Intra-uterine contraceptive devices are made either from polyethylene and copper or polyethylene impregnated with medication. These are inserted into the womb, where they are effective for several years.

Super-rods

The latest contraceptive to become available on prescription is Norplant. This comprises six progestogen-releasing rods placed under the skin and is effective for five years. Interest has been great with demand outstripping the number of doctors and nurses trained to insert the device.

With all this choice, it's amazing to discover that more methods are on the way. Femring, a long-acting progestogen on a vaginal ring is expected to be with us in a few years and work is under way on a vaccine, which could be used in men to block sperm production.

But it brings back that old question, would you trust a man who swears he's been vaccinated?

The good old days?

What do crocodile dung, animal ear wax, cabbage, fried quicksilver, animal gut and crossing your fingers have in common? Strange as it may seem, all have been used at one time or another as contraceptives!

Preventing pregnancy is something women have been concerned with for a long time. In ancient Egypt, crocodile dung pessaries were used and the vagina washed with a mixture of honey and sodium carbonate in the belief that this would do the trick.

conception or aborted the embryo. Perhaps they worked because no man would dare come near you after you'd drunk them!

Superstition has played its part as well. Asparagus charms were worn in Roman times and, during the 16th century, Yugoslavian brides

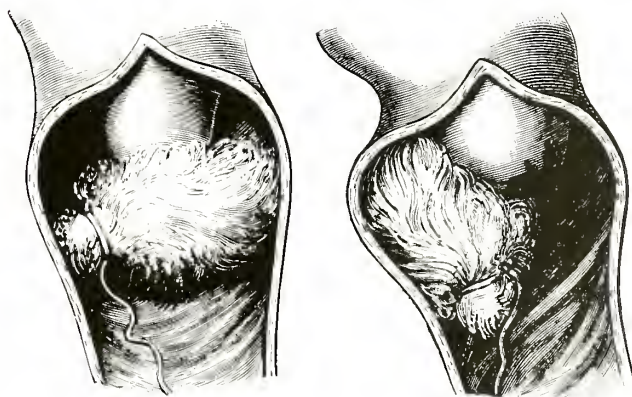
suggested that it was named after a Dr Condom who was a physician to Charles II, or after a French village.

In mid-18th century London, a Mrs Phillips was famous for her wholesale condom business. She boasted that her condoms had an "extraordinary fine thin substance...bound round with a scarlet ribbon for ornament". This may explain why Casanova referred to condoms as "English overcoats".

The development of rubber vulcanisation in 1844 caused an upsurge in condom popularity as they became cheaper to buy.

The first seamless condom was introduced at the end of the century and the teat-ended product put in an appearance in 1901. Liquid latex in the 1930s resulted in a stronger condom and a shelf life of five years, rather than three months.

Mary Evans Picture Library



This diagram from 1905 shows how conception can be prevented with cotton wool, saturated in vinegar and placed over the cervix. The cotton wool is shown in the correct position (left) and the incorrect one (right)

Honey was thought to have a spermicidal effect. Unfortunately, it is alkaline and makes sperm mobile: not quite the desired result!

In the tenth century AD, women were still using pessaries which blocked the womb opening or expelled semen, according to the Islamic writer Al-Razi. These could be made from tar, ox gall, the inner skin of a pomegranate, mulberry leaves and whitewash. They were inserted into the vagina on a home-made tampon of grass, wool or lint.

Another way to stop pregnancy was to drink a specially-prepared potion. Tender willow shoots, bees, castor oil seeds, the internal scrapings of deer antlers, and a hare's stomach juices have all been taken in the belief that they prevented

would place an unlocked padlock in their bodices on the way to the wedding ceremony. The number of steps she took outside her house before locking the padlock determined the number of years she would like to remain childless.

For the men

The use of condoms is suggested to go back as far as the ancient Egyptians. They are said to have dyed them various colours, although no evidence exists.

The invention of the condom has been credited to an unknown medieval slaughterhouse worker who thought of covering the penis with animal membranes such as gut. The Chinese used oiled silk paper while the Japanese used to wear hard sheaths made of tortoiseshell, horn or leather. No doubt they rated low on the comfort scale!

The first description of a condom was in 1564 by the Italian anatomist Gabriello Falloppia (who discovered the fallopian tubes).

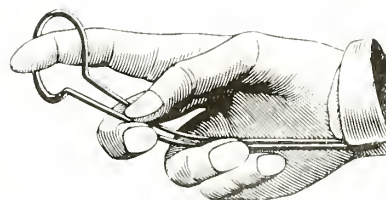
The origin of the word condom is shrouded in confusion. It has been

Up to date

Although polyurethane was introduced in the 1960s, its quality was poor. As this has improved, it's now used in the female condom and in Durex's new male condom being launched this year.

But is Femidom the first female condom? A legend dating from AD 150 states that a goat's bladder was used as a female sheath. And, as late as 1934, the London Rubber Company introduced their first female condom — the Elarco Capote Anglais. This was made from the finest sheet rubber with a pneumatic outer rim!

We must consider ourselves lucky now that we have all manner of contraceptives. But perhaps we underestimate our inventive predecessors — maybe the smell of crocodile dung is enough to dampen any romantic ardour. Anyone fancy trying it?



Mary Evans Picture Library

Natural rhythm

Natural family planning relies on being able to predict the best time to have intercourse, whether it's for planning or preventing pregnancy.

There are four methods: the temperature method, the cervical mucus method, the calendar method and the sympto-thermal method.

The problem with all these is that they require record-keeping and a strong degree of commitment and motivation. However, the advantage is that there is no risk of side-effects.

More ammunition

Pharmacists have been calling for more effective measures in the fight against minor illness. Now, with the POM to P switch of H₂-antagonists, they are getting their way

Pharmacists have been using the argument for years. If more effective products were available over the counter, they would be able to deal with minor illnesses, freeing doctors to spend more time dealing with serious complaints.

Now the Government has acted and last year announced plans which saw more prescription products applying for pharmacy status than in the last ten years put together.

At the end of January, the necessary legislation was approved to allow a batch of these POM to P switches to take place. This article takes a look at one group of products, the H₂-antagonists.

Controlling the acid

H₂-antagonists have been around on prescription for many years to treat stomach ulcers and related conditions. Two of these products are now available over the counter — Pepcid AC (famotidine) and Tagamet 100 (cimetidine).

Both work in essentially the same way, acting on the parietal cells which line the stomach, to reduce the amount of acid produced.

When bought over the counter, these products are licensed to treat heartburn, dyspepsia and related complaints. These are very common conditions and ones which customers often self-treat. Heartburn is caused either by too much acid being produced by the stomach or acid that is in the wrong place.

Producing acid is an important role of the stomach. The acid helps digest food and kills off any bacteria that might be present. However, if too much acid is produced, or if it rises out of the stomach into the oesophagus (the



recommended to patients who have found that antacids or alginates are insufficient. They work by controlling acid secreted in the stomach and are much longer acting. Pepcid AC for example controls stomach acid for up to nine hours.

Lifestyle advice

Anyone seeking advice on heartburn and related symptoms should also be given the following lifestyle advice to help prevent them suffering:

- Stop smoking
- Avoid certain trigger foods, like fatty foods, coffee, chocolate and highly-spiced foods
- Eat small, regular meals and avoid heavy meals at night
- Cut down on alcohol
- If overweight, lose weight and avoid tight-fitting clothing

- Pay attention to posture — bend at the knees not from the waist, raise the head of the bed slightly at night and avoid lying down too soon after eating.

Full details of the two new H₂-antagonists, their doses, pack sizes, etc, can be found in our Showcase section which starts on page 39.

Be prepared

The availability of a new group of medicines over the counter puts even more pressure on the pharmacy staff to act responsibly when selling medicines. The manufacturers of these products recognise this and have produced detailed training packages, both for pharmacists and their assistants.

If your pharmacist hasn't passed on the assistant's manual to you yet, why not ask for it and then you can read up on the condition and the products before you have to advise your customers.

Who should you refer?

- Anyone under 12 years of age
- Anyone who is pregnant or breast-feeding
- Where there is pain radiating down the arm or pain which occurs during exercise
- Pain or difficulty in swallowing
- Anyone with unexpected weight loss
- Middle-aged patients suffering symptoms for the first time or who have symptoms which have changed markedly
- Unexplained vomiting
- Anyone reporting signs of gastro-intestinal bleeding, like dark, tarry stools
- Anyone with known liver or kidney problems
- Anyone taking other medicines from the doctor or who is receiving medical treatment for another condition

gullet), the person will experience a burning pain or discomfort in the centre of the chest.

Treatment options

H₂-antagonists join two categories of existing products available OTC for heartburn and related conditions. Simple antacids (eg aluminium hydroxide mixture, Rennie, Remegel, Setlers) are the most commonly used remedies.

They act by neutralising the acid in the stomach but have a short duration of action.

Alginates (eg Gaviscon, Magnatol) act by forming a raft on the surface of the stomach's contents. When refluxing into the oesophagus occurs, the raft of medicine is pushed up too, protecting the lining of the gullet. Alginates have a longer duration of action than antacids.

H₂-antagonists can be



KEEP THE THREE HAZARDS OF HEARTBURN AT A SAFE DISTANCE

Heartburn can be caused by not one, but *three* hazardous agents **acid, bile and pepsin.**

But with the special action of **Gaviscon** you can steer **4 out of 5** customers clear of the pain.^{1,2,3}

Gaviscon gives **3 in 1** protection by forming a *physical alginate barrier* over stomach contents to keep acid, bile and pepsin *away* from the sensitive oesophagus lining.

But unlike Gaviscon, some heartburn remedies only act on acid –

leaving the oesophagus exposed to irritation and damage from refluxing bile or pepsin.

Protect your customers from the three hazards of heartburn. Recommend **Gaviscon.**



GAVISCON

3 in 1 protection against heartburn

Product Information. Active Ingredients: Liquid Gaviscon: Sodium alginate BP 500mg, sodium bicarbonate Ph Eur 267mg, calcium carbonate Ph Eur 160mg per 10ml dose. Gaviscon 250 Tablets: Alginic acid BP 85mg, sodium bicarbonate Ph Eur 85mg, aluminum hydroxide gel BP 50mg, magnesium trisilicate Ph Eur 12.5mg per tablet. **Indications:** Liquid Gaviscon: Heartburn, including heartburn of pregnancy, dyspepsia associated with gastric reflux, hiatus hernia and reflux oesophagitis. Gaviscon 250 Tablets: Heartburn and acid indigestion. **Contra-Indications:** None known. **Dosage Instructions:** Liquid Gaviscon: Adults and children over 12 20ml, children 6-12 5-10ml liquid after meals and at bedtime. Children under 6 Not recommended. Gaviscon 250 Tablets: Adults and children over 12 2 tablets to be chewed thoroughly as required. Children under 16, 24 tablets £1.95. **Product Licence Nos:** 44/0058 Liquid Gaviscon, 44/0140 Peppermint Flavour Liquid, 44/0103 Gaviscon 250 Tablets, 44/0143 Lemon Flavour Tablets. **Legal Category:** GSL. **Product Licence Holder:** Reckitt & Colman Products Limited, Dansom Lane, Hull HU8 7DS. GAVISCON is a registered trademark. **Date of preparation:** 2/93. **References:** 1 Chevrel B (1980) *J Int Med Res* 8: 300. 2 Ward AE (1989) *Br J Clin Pract* 43: (2) Suppl 66 52. 3 Williams DL et al (1979) *J Int Med Res* 7: 551.

RECKITT COLMAN
PRODUCTS

TAGAMET* 100

cimetidine

NOW THE WORLD'S FIRST H₂-ANTAGONIST GOES OTC,

SmithKline Beecham Consumer Healthcare is delighted to announce that cimetidine, the active ingredient in Tagamet, has been granted a Pharmacy licence.

Tagamet was the first H₂-receptor antagonist and is one of the world's most widely prescribed medicines. Tagamet 100 will be indicated for the short-term symptomatic relief of heartburn, dyspepsia and hyperacidity, as well as for the prophylactic management of nocturnal heartburn. Your local SmithKline Beecham Consumer Healthcare representative will be calling soon with further details. This will enable you to gain maximum benefit from one of the most important POM to P switches the healthcare profession has ever seen.

A 4-part Pharmacy Reference and Training Manual and point-of-sale material has been produced by SmithKline Beecham Consumer Healthcare to ensure that you and your assistants are well equipped to handle this important therapeutic breakthrough in the pharmacy.

Make sure that you don't miss Parts 1 and 2 of this detailed training programme which will be arriving in your pharmacy soon.



Product Information: **Presentation:** White elliptical film coated Tiltab tablet containing 100 mg cimetidine. **Dosage and administration:** Adults (incl. the elderly), 16 years and over: Relief of heartburn, dyspepsia, hyperacidity: Two tablets with water when symptoms appear. If symptoms persist for more than 1 hour after the first dose, a second dose may be taken, but no more than 4 tablets in any 4 hours and no more than 8 tablets in any 24 hours. Prophylactic management of nocturnal heartburn: One tablet with water one hour before bed time. In all cases, not to be taken for more than two weeks. If symptoms persist for more than two weeks or recur frequently, a doctor should be consulted. Not to be given to children under 16 years of age. **Use:** Short term symptomatic relief of heartburn, dyspepsia, hyperacidity. Prophylactic management of nocturnal heartburn. **Contra-indications:** Hypersensitivity to cimetidine or any of the excipients. **Precautions:** Not recommended in patients with impaired renal function, hepatic impairment; taking oral anticoagulants, phenytoin, theophylline, intravenous lignocaine; middle aged or older patients with new/changing dyspeptic symptoms, any patients with unintended weight loss and dyspeptic symptoms, because of potential delay in diagnosis of gastric cancer; with a history of peptic ulcer.

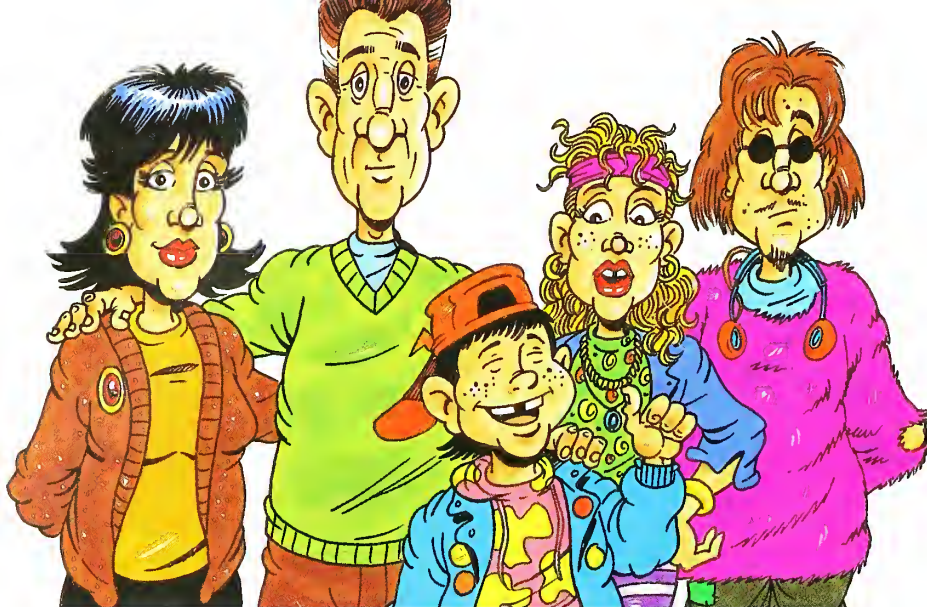
ECLIPSING ALL OTHER PRODUCTS FOR HEARTBURN, EXCESS ACIDITY AND DYSPEPSIA



SAIDS, esp. elderly; with compromised bone marrow; in pregnancy and lactation; with any other illness, using any medication, under medical supervision for other conditions. **Adverse reactions:** Diarrhoea, dizziness, rash, tiredness. Gynaecomastia, occasional liver damage, confusional states (usually in the elderly or very ill), all reversible. Thrombocytopenia, leucopenia, agranulocytosis, all reversible. Very rarely, interstitial nephritis, acute pancreatitis, headache, myalgia, arthralgia, fever, sinus bradycardia, tachycardia and heart block, all reversible, aplastic anaemia, pancytopenia and anaphylaxis. Reports of alopecia and very rarely reports of reversible impotence but no causal relationship has been established at usual prescribed therapeutic dosages. **Product licence number:** 0002/0230. **Retail Price:** Tablet (12's) £2.29, (24's) £3.99. **Legal category:** P. **Date of preparation:** 9 March 1994. 'Tagamet' and 'Tiltab' are trademarks. SmithKline Beecham Consumer Healthcare, SB House, Brentford, Middlesex TW8 9BD. Telephone number: 081-560 5151.

SB SmithKline Beecham
Consumer Healthcare

* Tagamet is a registered trademark of Smith Kline & French Laboratories Limited



The Maladies

Treating thrush

Maggie Maladie wants to have a word in private. She thinks she has thrush, but getting an appointment at the doctor will take a few days. Can you help her in the meantime?

Maggie: "Can I have a word somewhere quiet please?"

Assistant: "Of course. What seems to be the problem?"

"I've got this itch down below, you know, both inside and out. And there's this discharge as well."

"When you say 'down below' do you mean the vagina?"

"Yes."
"Have you had anything like this before?"

"Yes, about 12 months or so ago, I had a similar itching, but more of a discharge that time."

"Did you go to the doctor?"

"Yes. He said it was thrush and gave me some tablet type things I had to put inside me. That seemed to do the trick."

"I thought about going to the doctor, but because of the weekend I can't get an appointment for three days and I don't want to wait that long. Is there anything I can buy?"

"Yes, there are products you can buy to treat thrush but they are not suitable for everybody. You're not pregnant or a diabetic, are you?"

"No."

"And does it hurt when you pass urine?"

"No, but I noticed it was a little uncomfortable when making love."

"Vaginal dryness is one of the symptoms of thrush. You may find it better to avoid intercourse for a couple of days until the condition clears up. What about any vaginal bleeding?"

"You mean my period?"

"No, bleeding when you don't normally have it."

"No, nothing like that."

"Well, in that case, it would be OK for you to use

an over the counter treatment. These come in a choice of creams or pessaries which are probably what you had last time from your doctor."

"Follow the instructions carefully but if the symptoms don't clear up you must go to your doctor."

"What causes thrush?"

"It's caused by a yeast called Candida, which occurs normally in our bodies, but sometimes grows out of control. Pregnant women seem particularly prone and taking a course of antibiotics can trigger an

attack. Wearing tight clothes made of synthetic fibres can make you more susceptible as can overuse of perfumed toiletries like bubblebaths, deodorants or soaps."

"I did have some antibiotics from the doctor about ten days ago for a chest infection. Could that be the cause?"

"It's possible. Next time your doctor gives you antibiotics you should mention this thrush to him. He may give you a thrush treatment at the same time, just in case."

Common condition

Thrush is the most common vaginal infection among women of child-bearing age. It is estimated that nearly half of women aged between 16 and 60 years of age have suffered an attack at some time and each year approximately four million women will endure at least one bout.

Before changes in legislation allowed the sale of vaginal imidazoles over the counter, there was little you could buy to treat thrush. Sufferers went to their doctor, but often had to

Continued on p28

Who to refer to the doctor

While products to treat thrush are available over the counter, these women should be referred to their doctor:

- First time sufferer
- More than two attacks in six months
- Pregnancy
- Aged under 16 or over 60
- History of sexually-transmitted diseases
- Allergic to OTC thrush treatments

If any of the following symptoms are present, a trip to the GP is advisable:

- Blood-stained or foul-smelling vaginal discharge
- Ulcers or blisters on the vagina or vulva
- Pain or difficulty in passing urine
- Fever or chills
- Abdominal pain
- Diarrhoea, nausea or vomiting

Win a shopping spree with CYSTOPURIN[®]

Cystitis is the most common female health complaint, with over 50 per cent suffering from an attack at some stage of their lives, many of who suffer repeated attacks. "Cystitis" means inflammation of the bladder. An attack of cystitis can vary from woman to woman and has many different causes, however there are two main types of cystitis — bacterial and non-bacterial.

Bacterial cystitis

Around 50 per cent of all cases of cystitis are caused by bacteria reaching the usually germ-free urethra and travelling up to the bladder, where they multiply and irritate the bladder lining. Certain bacteria are present around the anus, and because a woman's anus, urethra and vagina are so close, it's easy for the germs to spread.

Bacterial cystitis is often termed "honeymoon cystitis" as it occurs after sexual intercourse. This is because bacteria can be pushed into the urethra during sex. If sexual intercourse is found to be a triggering factor, it is advisable for both the sufferer and their partner to wash the genital area before and after sex. Also, passing water before and as soon after sex as possible can help flush out any germs.

Non-bacterial

This can be caused by a variety of factors which irritate the bladder lining resulting in inflammation. Some women find that perfumed toiletries, vaginal deodorants, certain

drinks and foods can as irritants as can bruising during sexual intercourse. Even "holding on too long" before going to the loo or wearing too tight fitting trousers and underwear, especially in synthetic fibres can be enough to trigger an attack.

Cystitis symptoms

Each case of cystitis is different, but among the most common symptoms to look for are:

- a burning or stinging sensation on passing urine
- increased frequency of wanting to pass urine
- darker urine than normal sometimes with traces of blood
- a dull ache or pain in the lower abdomen

Getting relief

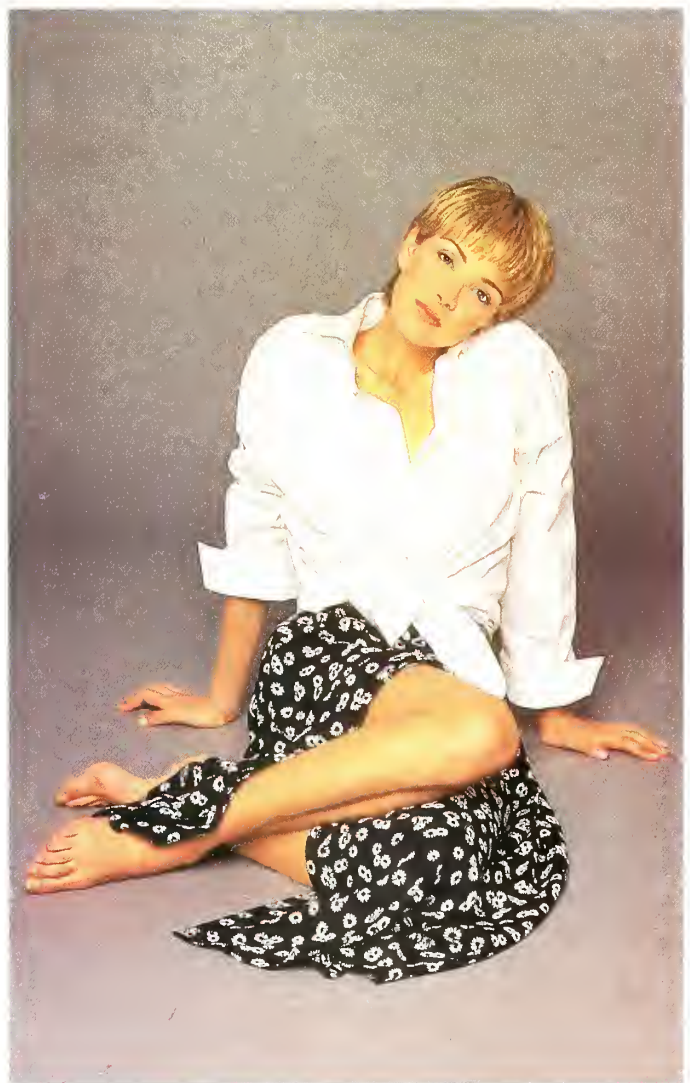
Confronting an attack of cystitis at the first signs gives the sufferer a greater chance of clearing up an attack quickly. Cystopurin, from Roche Consumer Health, gives fast and effective relief.

It's a pleasant citrus-flavoured drink in sachet form providing a 48 hour treatment, consisting of six low sodium sachets of potassium citrate soluble granules.

Cystopurin starts working quickly, relieving the burning sensation and helping to flush out bacteria.

As with all medicines, consumers are advised to always read the label and if symptoms persist for more than 48 hours, a visit to the GP is recommended.

® Cystopurin is a registered trade mark.



The competition

Indulge yourselves. Roche Consumer Health and Cystopurin are offering you the chance to win one of 10 £50 Marks & Spencers gift vouchers to spend at your leisure.

How to enter

Just answer the questions, fill in the entry coupon and send to: OTC/Benn Publications, Sovereign Way, Tonbridge, Kent TN9 1RW.

1. Name the two types of cystitis:
2. Name two common symptoms of cystitis:
3. The active ingredient in Cystopurin is:

Rules:

1. The competition is not open to employees of Roche Consumer Health, Benn Publications, their families or the company's agencies.
2. The closing date for the competition is April 30, 1994. Entries received after the closing date will not be accepted.
3. The winners will be drawn from all correct entries on May 4, 1994.
4. The judges decision is final and no correspondence will be entered into.

Continued from p26

wait for an appointment, and many resorted to home remedies.

Now it's more common for women to come to the pharmacy to ask about thrush. That means the assistant needs to be more aware of this condition, what the symptoms are and who should be referred to the doctor.

Thrush, or vaginal candidiasis to use its proper name, is caused by a yeast-like organism called *Candida albicans*. This is a normal resident in our bodies but usually its growth is kept in check.

Occasionally, however, it grows out of control and that's when problems start.

There are several reasons why *Candida* may grow out of control. For example, if conditions in the vagina become more alkaline, as can happen during menstruation, the yeast grows quicker. In pregnancy, too, hormonal changes can affect the levels of sugars in the womb and this also encourages the yeast to grow.

One of the most common causes is related to antibiotic use. The antibiotics themselves don't cause thrush, but they do kill off bacteria in the vagina and, without these, the *Candida* has a free reign.

While thrush is not considered a sexually-transmitted disease, it can be passed on if the woman's

Home remedies are not the answer

Women who resort to home remedies for thrush could be making their condition worse.

A survey of more than 4,000 women revealed a wide range of home remedies. Most popular was to apply natural yoghurt to the vagina on a tampon or towel. While this may soothe and relieve itching, there is little evidence to show it can cure the condition.

Adding antiseptics or vinegar to bath water is also common, but this may only add to the problems of itching and soreness. Other women drink more water, confusing thrush with cystitis, where this measure does help to flush out the infection.

partner is infected. This may be the cause of recurrent attacks and, if this is the case, the man should also be treated by his GP.

Wearing tight trousers or underwear, particularly made of synthetic fibres like nylon, creates a warm, moist environment which is ideal for the yeast to grow in. In



Picture courtesy of Crookes Nuroten

Three out of five women report considerable physical discomfort with thrush

Are women suffering unnecessarily?

The majority of women have an increased risk of suffering from thrush because they don't know what causes this condition or how to treat it, a survey has revealed.

More than two-thirds of women questioned did not know that antibiotics can cause thrush, three out of five were unaware that wearing tight or synthetic clothes can trigger an attack and three-quarters did not realise that repeated attacks may be due to re-infection from an untreated partner.

When asked about treatment, more than a quarter could not identify any suitable products, while one in five women would wrongly buy a cream for external symptoms.

Thrush has a distinct effect on the lives of sufferers with three out of five women reporting considerable physical discomfort and emotional distress associated with an attack. One woman in ten even has problems sleeping!

(Information courtesy of Bayer's Canesten)

some women, the use of tampons or uterine devices may damage the vaginal wall making infection more likely. Perfumed toiletries, which irritate the sensitive skin of the vulva, have a similar effect.

Range of symptoms

The most common symptoms of thrush are itching and soreness of the vulva and vagina, sometimes accompanied by redness and swelling of the area. Sometimes this swelling can affect the opening of the bladder and the woman may find passing water difficult or painful.

Many women also experience a vaginal discharge during thrush which is classically described as looking like yoghurt or cottage cheese, but with little or no unusual

smell. In some women this discharge may be less noticeable.

Another symptom is vaginal dryness and this can make intercourse uncomfortable. If the vagina gets swollen and bruised, it is more likely to harbour pockets of thrush that will not be cleared up by treatment. Therefore, it may be best to avoid intercourse for a few days or to use a lubricant.

It is also worth bearing in mind that many treatments for thrush can affect rubber contraceptive products such as condoms or diaphragms, reducing their effectiveness.

Once a woman has experienced an attack of thrush, she will easily recognise the symptoms again. However, if she has not suffered before, she should be advised to see her

GP for treatment.

There are a number of drugs available for thrush, ranging from creams and pessaries to oral tablets. The latter are only available on prescription, but creams and pessaries can be bought over the counter.

The active ingredients in many of these treatments are imidazoles. Common examples are clotrimazole (Canesten), miconazole (Femeron) and econazole (Gyno-Pevaryl).

The duration of treatment ranges from one to seven days but, in all cases, treatment should be started as soon as possible and completed, following the manufacturer's instructions carefully.

Discomfort can be reduced by keeping the vaginal area cool and dry, so wearing loose clothes and cotton underwear will help.

Prevention advice

Anyone who has ever suffered from thrush will be grateful for tips on how to stop it coming back again. Some women are naturally more susceptible than others, but there are a few easy steps which will reduce the risk of another attack.

- Wear cotton underwear, and stockings or socks instead of tights, to help keep the vaginal area cool. Avoid heavy, tight-fitting clothes, like jeans, for the same reason.

Continued on p31▶

Help us to identify the role of the pharmacy assistant. Fill in the questionnaire below and post free of charge and Canesten will offer the first two entries drawn after April 30, a relaxing weekend for two at Springs Hydro Health Spa in Leicestershire.

Reader profile



Q8: Why would you refer to the GP?

Q9: Which products are you most likely to recommend to treat vaginal thrush?

Q10: Of the product recommended, please indicate whether it is an intravaginal cream, pessary or external cream.

Q11: Why would you recommend this treatment? (open ended)

Q1: On average how many women a week consult you about vaginal thrush?

Q2: How many do you refer to the pharmacist?

Q3: Why would you refer to the pharmacist?

Q4: How confident are you about diagnosing vaginal thrush? (Scale 5 very confident, 1 not confident)

Q5: Are you embarrassed about discussing vaginal thrush? (Scale 5 very embarrassed, 1 not embarrassed)

Q6: Of the women that consult you for vaginal thrush treatment, what percentage would you estimate to be embarrassed to discuss the condition?

Q7: What percentage do you refer to the GP?

Q12: Do you feel that consulting rooms should be provided to help women discuss more difficult/sensitive health problems?

Q13: How do you see your role as a pharmacy assistant? (please tick)

As an advisor on women's health problems? ☐

As a recommender of suitable treatments? ☐

Mainly as an assistant to the pharmacist? ☐

Straightforward sales person? ☐

Name:

Address:

Telephone number:

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11

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continued from p28

Avoid very hot baths and limit the use of bath additives, perfumed soap or vaginal deodorants which can irritate the area.

Wash the vaginal area with luke-warm water and pat dry.

Wash underwear in a non-biological powder and rinse thoroughly.

Wipe bottom from front to back after going to the toilet.

Use a lubricant to prevent bruising during sexual intercourse.

A delicate subject

A thrush sufferer who asks for advice in the pharmacy is likely to be embarrassed about the condition and so a sympathetic and reassuring approach from the staff is very important.

If someone appears reluctant to talk openly in the shop, take them to one side, to a counselling area if

you have one but, if not, anywhere out of earshot will be fine.

Just because conditions of this nature are difficult to talk about to strangers, you should not be dissuaded from asking the necessary questions to ensure the woman should not go and see her doctor.

Follow the conversation that our assistant had with Maggie Maladie and you'll see that she asked a number of important questions to ascertain that the customer could safely self-treat.

If you would like more information about thrush, its symptoms, how to treat it and importantly how to prevent it in the first place, a number of manufacturers produce information on the subject. Check out the Literature Showcase on p5 for more details. Then you'll be prepared for the next person who seeks advice.

Coping with cystitis

Some women confuse thrush with cystitis but these two conditions are very different.

Cystitis is an inflammation of the bladder and about half the women in the country will suffer at some time, often repeatedly.

Typical symptoms are a burning or scalding sensation on passing urine and an urgent desire to go to the toilet even though there may be hardly any urine to pass. Sometimes an attack is accompanied by a temperature, backache, or cloudy or blood-stained urine.

About half of all cases of cystitis are due to a bacterial infection. Other causes include damage or bruising to the vagina during intercourse and allergies to toiletries or certain foods. Sometimes an attack can be linked to non-physical causes like stress or depression, but this is less common.

Treatment for cystitis should begin as soon as the first symptoms start, even if that means getting up in the middle of the night. It is important to drink plenty of water — at least eight pints a day — and to go to the toilet as often as is necessary, despite it being painful. "Holding on" only allows the infection to worsen.

A hot water bottle on the tummy or back helps relieve any pain or discomfort and an analgesic like aspirin or ibuprofen will help reduce a temperature.

OTC treatments for cystitis work by making the urine less acid. This reduces the burning sensation on going to the toilet and makes it more difficult for the bacteria to grow. The complete course of treatment should be taken to ensure the condition doesn't return.

Anyone whose symptoms persist after using an OTC treatment should go to their doctor, as should anyone who is pregnant, who thinks their infection is linked to a sexually-transmitted disease, who has an unusually heavy vaginal discharge or blood in their urine.

Simple measures can help prevent cystitis. At least three or four pints of water should be drunk daily to keep the bladder flushed out and, when going to the toilet, it's important to wipe the bottom from front to back to avoid transferring bacteria from the anus to the entrance of the bladder.

Other preventative measures which may help include:

- Avoiding antiseptics, perfumed soaps, talcs or vaginal deodorants.
- Avoiding tight trousers or underwear, and opting for cotton instead of synthetic fibres like nylon.
- Using a lubricating product, like KY Jelly or Senselle, to relieve vaginal dryness during intercourse.



Kate Lynam, pharmacy assistant at Melbury Chemist in Kensington, is pictured just before her prize-winning trip for two to Paris for the weekend, courtesy of the Remegel OTC Briefing Competition held by Warner-Lambert Health Care

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I thought a cream was



the perfect answer to thrush."

Doctors realise that women want the quick, soothing relief a cream can provide. But they also know that, while thrush may cause external itching, the fungus that causes thrush lurks

thrush more than anything else. Used inside the vagina, it's so effective that it treats just about all sufferers with one overnight treatment. The symptoms will start clearing immediately and will

"So why do doctors prescribe pessaries?"

inside the vagina. Unless it's killed there, the itch can come straight back. That's why you should recommend an intravaginal treatment: Canesten 1 pessary. It contains clotrimazole, which doctors prescribe for vaginal

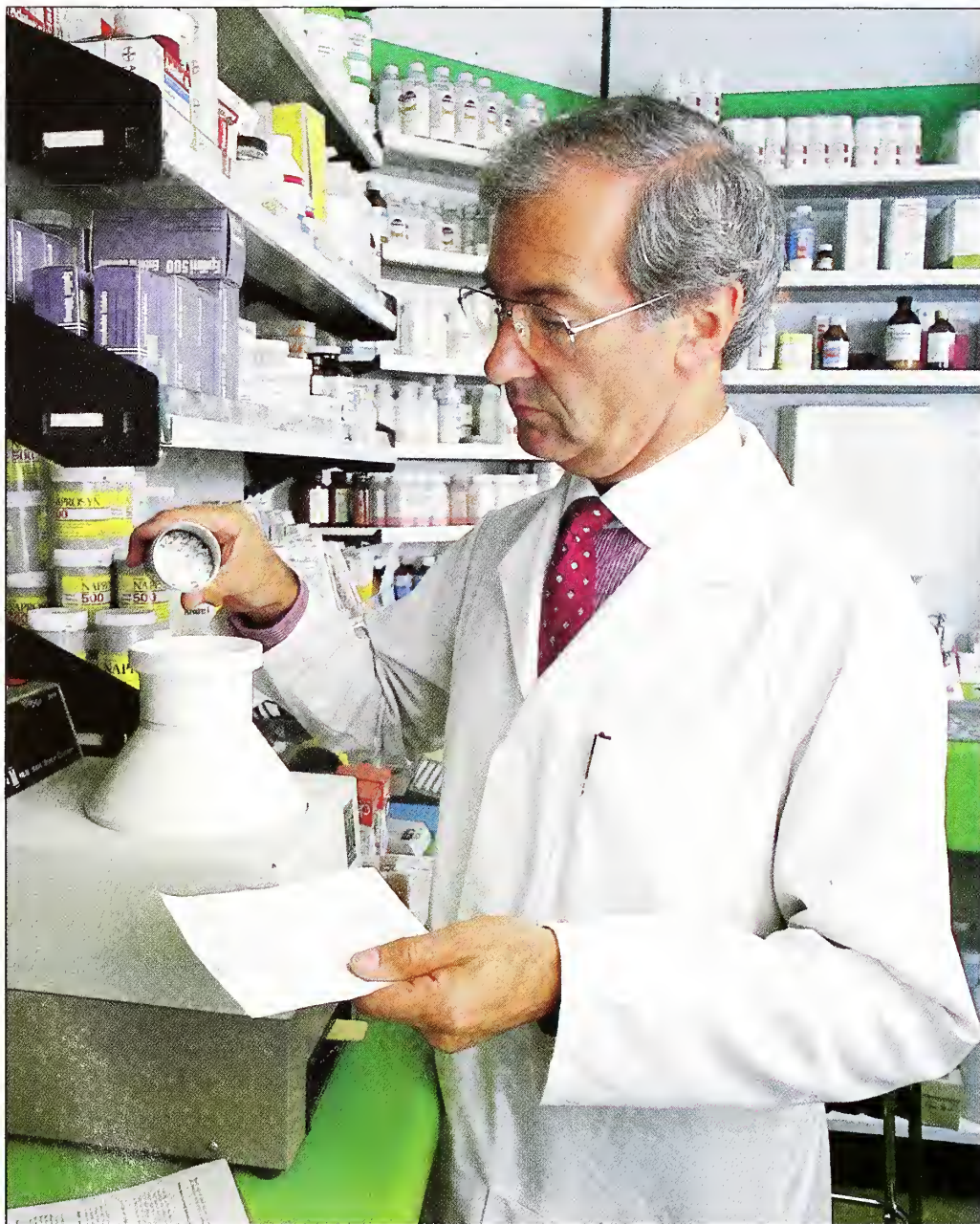
totally disappear within three days. Meanwhile, in really bad cases, you can suggest that the woman use a cream as well. But your first, and in most cases only, recommendation should be Canesten 1 pessary.



Treat the cause, not just the itch

Keeping records

Patient medication records, whether simple card systems or high-tech computers, are now commonplace. Liverpool pharmacist Jeremy Clitherow explains how PMRs can help improve your service to customers



It is so easy to concentrate on the advances made in technology within the last few years alone and forget that pharmacists, and apothecaries before them, have kept patient medication records for generations.

PMRs are nothing new. Before the NHS came into existence in 1948, all

prescriptions were private and had to be recorded in the Prescription Book.

Have you noticed how pharmacists tend to hoard things? It is quite probable that your pharmacy still has its original leather-bound Prescription Book. Ask your pharmacist if you may have a look. It will make fascinating reading. Don't

forget that the information in that book is as confidential now as it was when the records were made.

After 1948, the requirement for recording the details of the new NHS prescriptions was relaxed. Nowadays, we find that things have turned full circle. While the private prescription is now the

exception and the NHS one the rule, we record the data on them all.

Recording systems vary from loose leaves, index cards, exercise books, bound prescription books, simple computer-based labelling machines, through to state of the art technological software packages.

The brand-leading machines will even suggest remedies for you. You just type in headache, stomach ache, or whatever, and the monitor displays suggested products for the symptoms.

Latest advances offer over the counter and prescription medication cautions and interaction facilities, too. Whether your pharmacy wants, or needs, to invest so heavily in this technology is a complex question and depends very much on your type of pharmacy and how much use such a system will be to you.

Special needs

The original idea behind the promotion of PMRs for modern-day patients was to cater for the needs of a relatively small category of special cases. The elderly, the confused, the mentally ill and the ostomy patients come immediately to mind.

Following on from that came the expansion of nursing homes and residential homes, with their constantly changing patient profile and complicated schedules of medicines. This brought about a different but complementary need for data recording.

The NHS and Community Care Act will lead to pharmacists pooling patients of one specific category together. The vogue term is "a cluster". A pharmacy could thus be regarded as catering for a cluster of specific needs patients in its vicinity.

Modern PMR systems have the facility to cluster files together, e.g. all the mentally ill, all the smoking cessation candidates and all the asthmatics. Older systems just reserve one file per patient and leave you to sort them out.

All this sophistication is commendable, but not entirely essential. You could

ust as easily reserve one page or section of a book for your "needy" patients or use a treasury tag to hold a set of punched cards together. It all depends on your system of doing things. It is a typical example of horses for courses.

So what do you need to record for each patient?

Needless to say, the basic requirement is to identify the patient accurately. A file named J. Smith is worse than useless. All the data for all the variants of J. Smith would go in there. The christian name by which the patient is known, rather than his first name, should be highlighted, followed by his surname.

It is good practice to liaise with your local surgery to identify all these idiosyncrasies. For instance, if John Arthur Smith is always known as Arthur, record him as J. Arthur Smith. Simple isn't it? He will be recognised and distinguished at a glance from all the other John Smiths.

The patient's address is important. How often do people move house or stay with relatives, but not according to their doctor's records. If you ever needed to go round to the patient's house, where would you go? The answer is to amend the file and then amend it back. Your record will show that the family came to visit Mum and then went back home.

The phone number can be invaluable. For example, think of trying to budget how many oxygen cylinders to order to cover the Bank Holiday weekend and what if Mrs Smith hasn't brought in Mr Smith's prescription yet. If you had his number in file you could give him a ring and ask if he will be needing his oxygen delivery, ready for the Bank Holiday.

Noting allergies

Allergies, especially to penicillin, immediately spring to mind as vital pieces of information to be recorded. You may well remember that John the butcher cannot take penicillin, but will the locum know to intervene if an appropriate medicine is prescribed?

Similarly a diagnosis of diabetes, which would effectively rule out any sugary medicines, and many other more specific remedies, should be entered on the record. People taking drugs such as warfarin are warned not to take aspirin. The list is endless.

Scripts from nurses

Nurse prescribing is just around the corner. The first announcement that appropriately-trained nurses were to be allowed to prescribe certain medicines and appliances on the NHS caused quite a stir.

The launch was delayed, possibly because of the added cost to the prescribing budgets. Now it appears that it could be coming to fruition, after all.

The new nurse prescribers will need all the help we can give them. With the permission of the doctor and the patient himself, access to your PMRs could be their salvation, in the beginning at least.

Fortunately, most PMR systems have built-in interaction alerts, but they only work if you also feed in the correct information in the first place.

Some pharmacies record all sorts of other data such as National Insurance numbers and obscure and rarely used information. If you don't need it, don't record it. What you must be is consistent and record the same information for all your patients.

Nursing homes

Let us say that you service a small nursing home, which is set out as two wings on either side of the entrance with an upstairs, and that there are 24 beds in all. There will be six patients in wing A downstairs, six in wing B downstairs, and the same again for the first floor.

We all know that the care staff will "do" one wing at a time, so wouldn't it be useful if you could identify all the patients in each wing and then pack all of the medicines for each unit together. It would help your colleagues in the home no end, and gain you "Brownie points" in the process.

Many elderly patients will tell you that they really hate the child-resistant closures we are required to use on medicines. It is for them to opt out of the system rather than vice versa.

In practice, that means that everyone is given CRCs unless they specify otherwise. The obvious place to record this piece of information is on the patient's file — prominently. The dispensary staff will not be pleased if they have to re-pack a multi-item prescription because the customer wants "easy tops".

Missing product details can be a nightmare. The patient brings in a prescription for 100 colostomy bags, but the script just says "as before". Which make of bag is it, which flange size, is it drainable or sealed? The list

of questions is endless. To make it worse, this situation always seems to happen when the shop is busy or just about to close.

How much easier it would be if you could pull out that patient's record and see exactly what they had last time, check that it suited them and that the doctor didn't say anything about changing the prescription.

Even better would be a file which displayed the maker of the correct colostomy bags, their telephone number, your account number with them, their product code and the quantities in the pack.

The dose is so often missed off prescriptions. How the patients are expected to comply with instructions either missing or given to them verbally in the surgery during the consultation is beyond most of us.

If the patient has forgotten, and you need to contact the surgery, think how much more efficient it would be for you to be able to give the solution at the same time as asking the question. Your medication records could tell you what the patient had last time in an instant.

The future

In the pharmacy we will be seeing more and more EPoS (Electronic Point of Sale) tills linked with the main computer in the dispensary. It is quite probable that soon the OTC purchase of medicines will be added to, or compared with, the customer's prescription file and the appropriate warnings given.

For example, many decongestants and cough mixtures are based on anti-histamines and ephedrine analogues. One of your customers could unwittingly buy one of these products, forgetting to tell you that it was for her elderly father who has high blood pressure.

The 2WHAM questions

will help you prevent this potential accident.

We tend to live by the creed that if medicines are not taken as prescribed and dispensed, the patient won't get better, but reality sometimes proves otherwise.

What happens if the patient doesn't take the medicine, but improves anyway? Theoretically, it cannot happen, but in practice it does. The sad fact of the matter is that our scarce resources have been used, wasted and untaken medicines hoarded. If your record system is working properly, you should be able to pinpoint such waste.

Similarly, poor user techniques will be seen, for example, in the asthmatic who returns time and time again for a repeat prescription for his inhalers, but never seems to have his condition under control.

A closed question such as, "Do you know how to use your inhaler?" will inevitably produce the answer, "Yes, thank you". Whereas if you say: "I see from your record that your inhaler only lasts you seven days, will you show me how you use it?", a demonstration may reveal that they don't know how to use it properly.

Effective records will thus bring about control of their condition, health gain and add quality to their life; and, let's face it, that's what we're in this business for.

Generic medicines

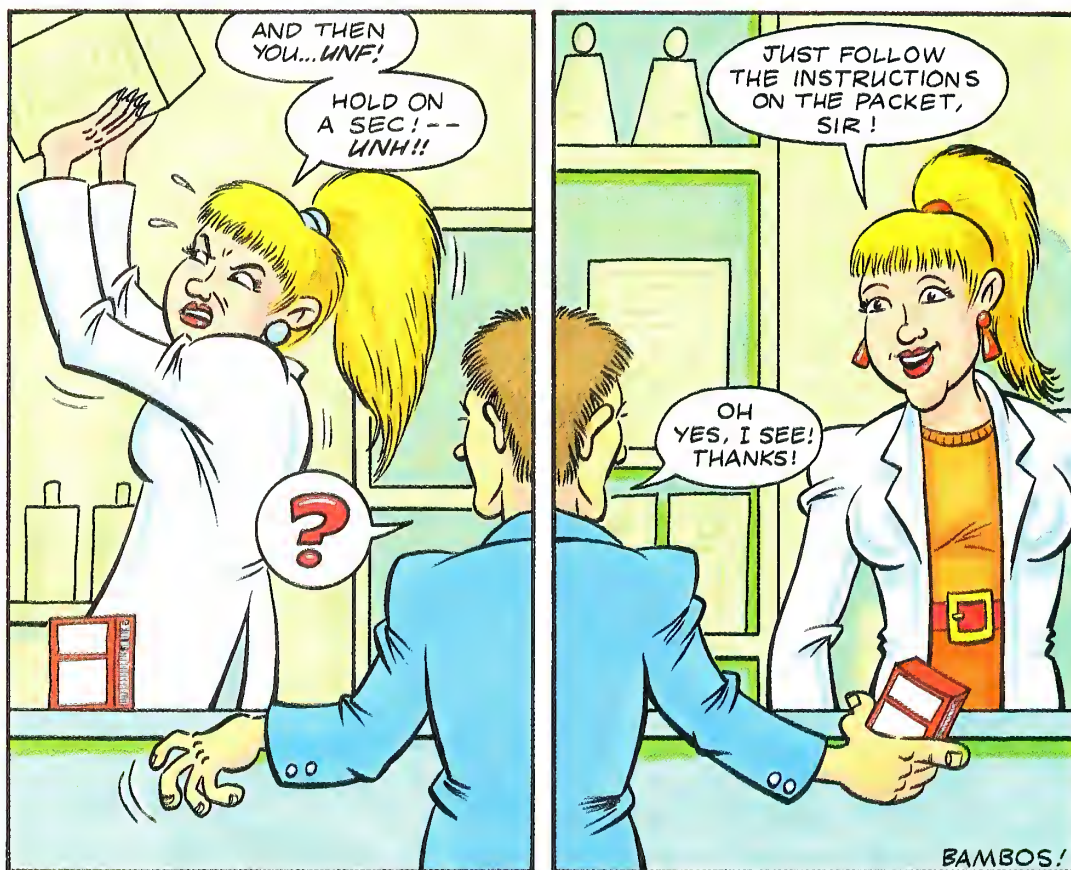
The continued pressure on GPs to prescribe generic medicines, rather than named brands, has resulted in an avalanche of queries for us all.

"These tablets are different — you've given me the wrong prescription — these aren't my tablets" are all familiar comments to everyone working in pharmacy. Mostly, the tablets are right, they just look different.

What has gone wrong is that no one has explained to the patient that the medicine may look different, but is in fact the same as they had before. Generic prescribing has demonstrated the need for effective communication more than any one other single event in recent times.

Without the benefit of comprehensive records, how can you hope to confirm the facts and then reassure your patient?

We talk a lot about communication. When we don't have all the information we want, we wonder why other people don't communicate with us more. Training consultant Diane Bailey looks at the art of getting your message across



Communication skills

Communication is much more than just giving people specific information, it is about sharing our thoughts and feelings as well.

Think of communication as being like a radio set, a message, the programme, is sent out by a transmitter, the radio station and is received by a radio set, the receiver. In all communication there is a sender, a message and a receiver.

Sending a message is no good unless it reaches and is understood by the receiver. It doesn't matter how often you tell somebody something unless they actually hear and understand it. Telling people is not enough, you have to think about what you are saying and how it will be received.

Communication is very much part of the work in your pharmacy so it pays to get it right. There are a number of elements you need to think about to ensure that efficient communication takes place.

If you are the sender of

'It doesn't matter how often you tell somebody something unless they actually hear and understand your message'

the message, ask yourself if you're clear about what it is you want to achieve, about why you are communicating and whether you are in the right mood to send your message. Think about your aims, too. Ask yourself what effect you want to achieve or what reaction you want to provoke.

Then there's the content of the message. Are you clear about what you want to say, the best way of saying it and whether there is something in your message which the other person won't want to hear?

Which method of communication you use should also be considered. Will you speak to someone face to face, by phone or write a note?

And what about the

receiver? You need to think about who they are, what they will want/not want to hear and if there are any special needs or barriers.

Finally, consider the situation you're in. Ask yourself: Is it the right time? Is the mood the correct one? Are there any barriers to receiving your message? Are there any difficulties or conflicting demands on your time or that of the receiver?

It's not easy

Communicating isn't always an easy process. We all do it all the time with varying degrees of success, but to be effective we need to aim for maximum efficiency with minimum effort. To do this you need to understand that there are barriers in every aspect of communication.

Let's look at the process and see what happens when you send a message:

- Phase 1 — sending information
- Phase 2 — receiving or hearing
- Phase 3 — understanding
- Phase 4 — level of acceptance

Barriers exist at all stages.

● **Sending.** You may be the barrier, because you may not have planned enough to get the right message across. For example, giving detailed instructions, very quickly to someone who is obviously upset or tearful could be a waste of time. They probably won't hear or if they do they won't take it in.

● **Receiving the message.** There are lots of possible barriers here. The other person may be upset or they may have needs and expectations of their own. For example, an elderly person may only be reassured by the pharmacist because they feel a young assistant can't know enough. They are not necessarily right, but if that's what they

We can't avoid communicating

We all communicate all the time, we can't avoid it. Even when we are not talking we are still sending messages.

Our very existence sends out messages about who or what we are. The fact that you are in the pharmacy looking neat and smart says, without words, "I work here, I am available to help you and I can advise you".

One interesting thing about communication is that we send and receive messages at the same time. You watch the other person's reaction and are therefore receiving signals from them while you talk to them. The other person reacts to your message in the same way. The only reason we can do all this is that our brains work faster than our speech.

believe it will affect their perception.

Understanding. Even if you have got everything right and the other person has apparently received our message, there is no guarantee that they have understood it.

There are lots of barriers to understanding, including the language or jargon you use, someone's degree of open-mindedness and their ability to concentrate.

If you think someone is not understanding your instruction, do check. Try to avoid asking: "Do you understand?" as most people won't admit if they don't. Instead try asking them to repeat the information back to you.

Acceptance. Even if the other person has received and understood your message it doesn't mean that they have accepted the content of it or that they intend to carry out the action you require. Barriers to acceptance can be complex and include attitudes and prejudices, personality clashes, emotional conflict or conflicting priorities.

Asking a colleague to do something when they are too rushed, will often not have a positive outcome.

Different types

In your work you will be involved mainly in face-to-face communication. You will probably also have to deal with telephone calls, plus the occasional note or letter.

In face-to-face forms of

communication two sets of skills are very important — verbal, what you say, and non-verbal, without words.

Verbal skills include the way you speak, question, listen and summarise. They also, of course, include the words you use. In forming a message, you need to choose your words carefully. Be sure to say what you mean, as well as saying what you want.

Think about a term like "pink" or "beige", often used with make-up and toiletries. Everybody who hears these words will have a slightly different picture of what you mean. You only get the same understanding if you show them the "pink" or "beige" in question.

A good listener

Questioning and listening are two of the most useful skills in communication. One of the best things you can do as a communicator is listen well. How good a listener are you?

We spend about 45 per cent of our time listening to what's going on. Despite this, it is a skill we all take for granted. We presume that because we can hear, we can listen. This is not so. Many of the difficulties and misunderstandings which crop up between people are due to the fact that most of us are poor listeners.

There are many barriers to good listening. They include:

- making hasty judgements
- not listening to problems
- being easily distracted
- taking words too literally
- hearing only what you want to hear
- physical factors, e.g. noise
- daydreaming
- being impatient
- interrupting
- switching off
- being afraid of criticism

It has been said that we hear with our ears and listen with our brains. Listening is different from hearing. It involves you in trying to understand what the other person is saying. When listening, you are interested not just in the words, but in the tone of voice, what is left unsaid and the other person's body language.

Ask questions

Much good communication is based on the skillful use of questions. Questions can be used to gather information, knowledge, experience, opinions, to explore feelings, attitudes and needs and to stimulate thought.

The best known types of questions are open questions and closed questions. Open

The dos and don'ts of effective listening

DO

- Concentrate
- Ask questions to clarify details
- Lean forward to signal interest and attention
- Summarise after each key point
- Ignore a "bad" speaker in order to get through to the tone of the message
- Hear the other person through
- Ask for something to be repeated if you're not clear
- Make sure you understand a question before answering

DON'T

- Allow your attention to wander
- Assume you have understood
- Look bored
- Wait for the end to summarise
- Try to anticipate what will be coming next
- Interrupt or try to finish the speaker's sentence
- Allow the discussion to move on until you have understood the previous point
- Allow emotive words or phrases to irritate you

questions get people talking. You can use them to get information from people. Having used open questions to obtain information, you can, if necessary, then use closed questions to define precise pieces of information or to achieve commitment.

Probing questions are also useful. These are questions you ask to get further and more specific information or narrow down possibilities. Good questioning technique can help with all these and will ensure better communication between you and the other person.

Body language

Research has found that the total impact of a message is 55 per cent non-verbal signals and gestures, 38 per cent vocal and 7 per cent the words used.

When you communicate directly with people, the meaning they take from what you say depends not only on the words you use but on other messages "given" by your facial expression, the way you stand, the gestures you use, the movements you make and your tone of voice.

You can read body language from:

- facial expression
- posture
- eye contact
- position of head
- gestures

Whole books have been written about body language alone, not to mention other aspects of communication. I hope this short over-view

helps improve the quality of your communication with customers and colleagues. *(Diane Bailey runs Diane Bailey Associates, a training consultancy in Rochdale)*

Be an active listener

Good listening is active rather than passive. Try to let your colleagues and customers know you are listening. There are a number of ways in which you can listen actively:

• **Posture.** Face the other person squarely in an open posture, lean slightly towards them, try to be relaxed and keep good eye contact.

• **Neutral responses.** When listening use verbal signals such as "hmmm", "ah" or even "yes", to encourage the speaker to carry on talking and to show you are listening.

• **Requests for clarification.** If you are not clear about the meaning ask for an explanation or clarification of a point.

• **Paraphrase.** Restate the message in your own words, to show that you have understood correctly and to let the other person see your interest.

• **Positive response.**

Summarise and give positive reactions before giving negative ones. Always make sure you summarise what has been said well so that each of you know what is to be done.

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THE BRAND LEADER



LEADERS IN NATURAL HEALTHCARE

showcase



Scholl combine insect repellent with skincare in Autan Fresco

Half of all people who suffer from biting insects prefer to suffer in silence, as they dislike applying an insect repellent because of its smell and feel, according to Scholl, who make Autan.

In response, they have introduced a new variant called Autan Fresco. With a 10 per cent concentration of the active ingredient DEET, Fresco repels insects for up to four hours, but feels more like a cosmetic lotion. It is non-greasy and a new fragrance system helps mask the smell that is normally associated

with these products.

To distinguish it from the rest of the range, Autan Fresco appears in blue packs, but retains the red and yellow Autan logo.

There are two Fresco variants — a lotion, £4.99, and a balm, £3.49. Scholl will provide merchandising and point of sale material.

The improved fragrance has also been applied to the aerosol and pump action variants of Autan Classic. Scholl Consumer Products Ltd. Tel: 0582 482929.

Fresh-smelling Nair range targets young, independent women

The Nair range of depilatory creams and lotions has been given a new look for 1994, aimed at young independent women aged 15-34 years, who are concerned with value for money.

Products in the Nair range now have a low irritation formula, which contains camomile for its soothing properties and aloe vera to help moisturise the skin. A new fresh fragrance is also designed to increase appeal.

Reflecting green issues, Nair Glide-on and Lotion are now in cartonless packs in modern blue and white livery.

The relaunch will be

supported with point of sale material, special offer packs and consumer sampling activity. Carter-Wallace Ltd. Tel: 0308 850661.



Now Pears looks after your hair as well

Building on the success of the Pears Pure Body range launched last year, Elida Gibbs have introduced Pears Pure Hair Care.

The new shampoo has been reformulated and contains extracts of avocado and lime, plus a new Pure Body Care fragrance.

There are two variants — Deep Cleansing and Deep Nourishing, the latter with added conditioners. Target retail price is £1.69.

The Pure Care range will be backed by a £3 million spend, which includes national TV advertising. Elida Gibbs Ltd. Tel: 01486 1200.



Imuderm for sensitive and dry skin



Imuderm, Goldshield's range of skincare products, is especially developed to provide non-irritant cleansing and moisturising for sensitive and dry skins. It is particularly suitable for eczema and psoriasis sufferers.

There are five products in the range — Imuderm hair wash, £2.95; cream, £2.45 and £4.75; body wash, £3.95; hand and face wash, £3.95; and shower gel, £3.95.

All are lanolin-free, non-perfumed, free of formaldehyde and other preservatives, colouring additives and harsh

detergents. They have not been tested on animals.

Goldshield Healthcare Ltd. Tel: 081-684 3664.

● OTC has free samples of Imuderm hair wash to give away to all pharmacy assistants who write to: *Over the Counter/Imuderm Offer, Chemist & Druggist, Benn Publications, Sovereign Way, Tonbridge, Kent TN9 1RW* by April 25. Please include your name, address and name of your pharmacy.

Wella add three Spring colours

Blonde is a fashion statement this Spring, as is rich and vibrant colour for darker hair, so Wella have added three new Colour Confidence colours.

Soft Velvet Brown



Two new products for Steradent

Reckitt & Colman are extending their range of Steradent denture products with two additions — Denture Fixative Cream and Fresh Cleaning Tablets.

There are currently over 16 million denture wearers in the UK, yet only 37 per cent use a specialist cleaning product.

Denture Fixative Cream has been formulated to give dentures a firm hold and to prevent them slipping or feeling loose. Added camomile helps soothe any gum irritation.

Fresh Cleaning Tablets contain menthol and eucalyptus for extra freshness in the mouth. It is thought that this will appeal to those who currently use a toothpaste as part of their oral care routine.

Deep Clean Tablets have been relaunched as Steradent Extra Strength and the pack size increased to 30. Reckitt & Colman Products Ltd. Tel: 0482 26151.



Relaunched Uvistat goes for a more upbeat, positive image

The Uvistat range of sun preparations has been relaunched as part of a move to give the brand a more upbeat and positive image. New products have also been added to the range.

Uvistat Babysun is being joined by Babysun Ultrablock SPF30, £7.39. To support the launch, the company is giving away a free teddy bear with every purchase from the Babysun range.

Support for the adult Uvistat range includes a free Aftersun with every Uvistat purchase.

The Uvistat Facial range, comprising Sunblock SPF22 and

SPF8 cream, launched in Boots last year, is now available through independents, too.

New to Boots this year, and likely to be extended in distribution next year, is a Uvistat Long Lasting range, comprising SPF25 cream and SPF15 lotion, plus SPF20 sunstick. All are sweat-resistant and water-resistant for up to five hours.

New packaging for the entire range is being phased in. The original black, orange and white packs will be replaced with beige, brown, gold and orange livery. Windsor Healthcare. Tel: 0344 484448.

Kodak relaunch films and add fun cameras

Kodak are relaunching their Gold and Ektar films and introducing an edition of Fun single-use cameras.

There will be four single-use cameras in the range — Kodak Fun, £5.49; Fun Flash, £8.99; Fun Waterproof, previously called Fun Aquatic, £8.99; and Fun Wide Angle, previously called Fun Panoramic, £7.99.

They have been designed to look more like real cameras and to dispel any doubts about the quality of photos that single-use cameras take. Targeted at the 16-34 year-old range, each camera contains a Gold 400 film.

Kodak Gold films are now available with improved colour accuracy and sharpness. The packs have been redesigned with symbols showing when the film can be used; for example, in sunshine or

cloudy weather. A new film speed guide will be available for display at point-of-sale.

The Ektar 100 and 1000 films have also been improved to give better colour accuracy, saturation and superior graininess, says the company. Kodak Ltd. Tel: 0442 61122.



Immac gets fresh for the Summer

If you've ever been put off using depilatories by their smell, then Reckitt & Colman had you in mind when they developed their new Immac variant.

Called Citrus Fresh, the product is very popular in Europe — in France it accounts for 40 per cent of cream sales.

Retailing at £3.29, Immac Citrus Fresh will come in packs with blue and yellow graphics to distinguish it from existing variants.

Also new for 1994 is a larger 150ml size of the



Immac sensitive cream, £4.99, and the wax strips have been relaunched with packs containing seven strips instead of six.

All Immac original

creams, lotion and spray now have a lighter fragrance and one product, Easy Shave, has been withdrawn. Reckitt & Colman. Tel: 0482 26151.

Beconase nasal spray moves POM to P for hayfever

Beconase is now available over the counter as a nasal spray to treat hayfever. It is the only intranasal corticosteroid available for the relief of seasonal rhinitis without prescription. The POM to P move follows changes in legislation at the end of January.

The active ingredient in Beconase Hayfever is beclomethasone dipropionate, 50mcg per spray. Packs, £4.99, contain sufficient for 100 sprays.

The recommended dose is two sprays into each nostril, morning and evening, to a maximum of eight a day. If symptoms have not improved after ten days' treatment, the patient should consult their doctor.

It is estimated that 15 per cent of the population suffers from hayfever and there is a low level of satisfaction with current treatments.

According to the

company, Beconase has the advantage of having been available on prescription for 20 years, plus the fact that it does not cause drowsiness or interact with other drugs.

The launch of Beconase Hayfever will be supported by a pharmacy education programme which will include a manual for assistants and a training video. Consumer information leaflets, point-of-sale material and display units will also be available.

A TV campaign for Beconase Hayfever

begins in April in the London area, which accounts for a third of all hayfever product sales.

Allen & Hanburys Ltd. Tel: 081-990 9888 and Warner-Lambert Health Care. Tel: 0703 620500.



Neutrogena broaden horizons

Neutrogena are breaking into the sun care market with their new range.

Suitable for sensitive skins, the products are free from chemical sunscreens, relying instead on titanium dioxide which reflects the sun's rays. All are fragrance-free.

The range comprises lotions in SPF8, £8.25;

SPF14, £8.95; and SPF25, £9.50. There is also an aftersun lotion, £6.95, which contains evening primrose oil, vitamin E and glycerine.

The launch will be supported with in-store leaflets, information for pharmacy assistants and educational kits for schools.

Neutrogena UK. Tel: 0494 474787.

Opticrom Allergy Eye Drops go OTC

Over the counter version of Fisons' Opticrom eye drops is now available from pharmacies. The move follows changes in legislation at the end of January which allow products containing sodium cromoglycate 2 per cent aqueous eye drops and 1 per cent eye ointment to be removed from prescription control. Opticrom Allergy Eye



drops are indicated for the treatment of acute seasonal (allergic) conjunctivitis. Each 5ml pack, £2.99, offers sufficient for ten days' treatment and can be used in addition to oral antihistamine therapy or topical nasal treatment. A number of other pharmacy-only sodium cromoglycate products are expected on the market over the next few weeks. Fisons Pharmaceuticals. Tel: 0509 611001.

Zirtek is a non-sedating antihistamine

Zirtek is the latest of the new generation antihistamines to be made available OTC. A non-sedating product, it contains cetirizine. One tablet is said to provide 24-hour relief from the symptoms of hay fever, including sneezing, runny nose and itchy eyes. Zirtek also has an anti-inflammatory action to help reduce nasal obstruction. Zirtek is available through Chemist and other representatives. CB Pharma Ltd. Tel: 23 211811.



The latest addition to the Sun E45 range is a Sunscreen Stick in SPF15. In a handy, portable format, it is suitable for sensitive areas such as lips, nose and ears. It retails at £3.09. To support the launch, Crookes are offering consumers the Sunscreen Stick free with any purchase from the Sun E45 range. The range will be promoted with Press advertising, running from May to August. Crookes Healthcare. Tel: 0602 507431



Smithkline Beecham's Tagamet goes OTC for heartburn

Tagamet 100, the second H₂-antagonist to receive a pharmacy product licence, should be available for sale over the counter from April. It can be recommended for heartburn, hyperacidity and dyspepsia.

Each tablet contains 100mg of the H₂-antagonist cimetidine, half the amount of the lowest dose available on prescription.

Patients will be advised to take two tablets when symptoms of heartburn arise and two further tablets if symptoms persist for more than one hour. The maximum recommended dose is 800mg per day.

Tagamet has the additional indication for relief of nocturnal heartburn. Patients should take one tablet an hour before they go to bed.

Tagamet 100 comes in packs of 12 and 24, retailing at £2.29 and £3.99 respectively.

To coincide with the launch, pharmacists are being sent a four-part reference and training manual. It explains how to identify patients with heartburn, hyperacidity and dyspepsia.

It also includes details of lifestyle advice and how to counsel patients about the correct use of the product.

Assistants will also receive a four-part guide to help them answer questions from consumers and show them when they need to refer to the pharmacist.

The company will also be holding training evenings for assistants and will be participating in one of the NPA's endorsed distance learning programmes. Smithkline Beecham Consumer Healthcare. Tel: 081-560 5151.

Piz Buin adds five new lines and cuts prices for Summer 1994

Zyma have added five new products to their Piz Buin range of sun preparations and have announced lower prices for this Summer.

New this year are: SPF15 Sensitive, £8.25; SPF10/6 Combi Pack, £9.50; SPF10 lotion, £7.95; SPF4 in a larger 400ml pack, £11.00; and an aftersun lotion with anti-mosquito ingredients, £6.95.

To help pharmacy staff, the company has produced a series of cards illustrating the Piz Buin range.

As an incentive for consumers, a free Fuji disposable camera is being offered with every purchase from the range.

In response to last year's price cutting of sun preparations by Boots and Superdrug, Zyma have cut their Piz

Buin prices by 10 per cent without affecting margins to retailers. Zyma Healthcare. Tel: 0306 742800.



Colgate's Precision targets plaque

Precision is the latest toothbrush to join the Colgate range and is the first to have three different bristle types.

Short inner bristles are said to remove plaque from the tooth surface while long inner bristles clean between the teeth. Splayed outer bristles massage the gum line where plaque can build up and lead to

possible gingivitis.

Colgate Precision is available with soft or medium bristles and will retail at £2.29.

The launch is being supported by TV advertising and a free brush will be given away on packs of Colgate Total in the Summer.

Colgate-Palmolive. Tel: 0483 302222.



Vaseline offers overnight moisturising

Elida Gibbs have added an overnight moisturising treatment to their Vaseline Intensive Care range.

The product has been formulated to help nourish skin and rebalance its moisture levels during the hours of sleep, says the company.

Non-greasy and easily absorbed, the product is suitable for use all over the body. It comes in either a jar or tube, both selling at **£3.49**. For a limited period only, a trial size, **£0.99**, will also be available. Elida Gibbs. Tel: 071-486 1200.



Otex is new for ear wax

Every year, over 2 million people have their hearing impaired, or suffer discomfort or pain, as a result of hardened ear wax. The problem is relatively easy to treat, but may involve having the ears syringed.

But now Dendron are introducing a new product for the treatment of ear wax which, they say, has been clinically proven to reduce the need for syringing.

Available on script for over ten years, Otex is now available OTC. It contains 5 per cent urea hydrogen peroxide.

Otex will retail at **£2.95**, and comes with a counter display unit with an information booklet on ears. Dendron Ltd. Tel: 0923 229251.



Gaviscon gives extra strength relief from heartburn

Reckitt & Colman have introduced a higher strength tablet to their Gaviscon range.

Gaviscon 500 Extra Strength Lemon Tablets, **£2.45**, are aimed at sufferers with more severe or frequent heartburn.

Each tablet contains alginic acid 500mg, sodium bicarbonate 170mg, aluminium hydroxide gel 100mg and magnesium trisilicate 25mg. Each tablet also contains

2.1mmol of sodium.

The recommended dose for adults and children over 12 is one or two tablets after meals and at bedtime. Treatment guidelines outlining the use of Gaviscon are available from the company.

Two new consumer leaflets — "Managing Heartburn" and "Managing Heartburn in Pregnancy" are also available. Reckitt & Colman. Tel: 0482 26151.



Bic introduce twin-blade razors for different skin types

Bic, who launched the first disposable razor onto the UK market in 1975, have introduced a range of twin-blade disposables for different skin types.

The range includes Bic Twin Select, for normal and sensitive skins, and Bic Twin Pastel, for female shavers.

All three designs feature a slim razor head, long, tapered handle and snap-on protective cap. Both normal and sensitive variants come in packs of five or ten.

The ladies' razor has special grips for better control while shaving in the shower or bath. It comes in packs of five, offering an assortment

of colours — pink, lilac, blue, mint green and turquoise.

Packs of fives are expected to retail around **£1.19** and the tens for **£1.99**. TV advertising and consumer sampling will support the launch. Biro Bic Ltd. Tel: 081-965 4060.

De Witt's healthcare range feature four new products

EC De Witt have relaunched their traditional healthcare products with new packaging and have introduced four new syrup products.

The new additions are: Secron syrup, **£2.59**, for children to help relieve nasal congestion associated with colds, catarrh and chesty cough; Ecdylin syrup, **£2.45**, for chesty coughs in the whole family; Placidex syrup, **£2.45**, to relieve pain in infants and babies caused by teething, toothache and sore throats; and Worm syrup, **£2.79**, for threadworms.

Across the existing range, packaging has been updated to give a more contemporary image. The new designs enhance on-shelf impact and communicate the products' benefits to the

customers, says the company. EC De Witt & Co Ltd. Tel: 0928 579029.



Get foot odour under control!

Foot odour can be a problem for one in five of the population, particularly men. To help the problem, Scholl have launched a new Odour Control range.

The range includes a foot powder, **£2.85**; spray, **£1.99**; and cream, **£2.95**. There are also three products for use in the shoes — shoe spray, **£1.99**, and odour-destroying insoles in regular, **£2.19**, or super strengths, **£3.35**. The insoles are guaranteed

to work for three months.

Scholl have also relaunched their athlete's foot range, containing the antifungal tolnaftate. The range now consists of a spray, solution, cream and powder.

Consumers can contact Scholl's customer services department for fact sheets on footcare. Scholl Consumer Products Ltd. Tel: 0582 482929.

Brol-eze goes OTC for allergic conjunctivitis

Rhône-Poulenc Rorer are launching Brol-eze eye drops containing sodium cromoglycate.

The product is indicated for the symptomatic relief of allergic conjunctivitis, often a problem for hayfever sufferers.

Research carried out

in 1993 revealed that 64 per cent of patients diagnosed as having allergic conjunctivitis on their first visit to a GP were prescribed sodium cromoglycate.

To support Brol-eze, RPR will be providing education material for pharmacists and

assistants. This includes treatment guidelines, a screening aid and consumer literature.

Brol-eze will be supported by a £1 million package, including advertising. Rhône-Poulenc Rorer Family Health Division. Tel: 0323 721422.

when you can't use soap most alternatives just **won't wash**

- Soap causes dry, sensitive skin to become irritated and inflamed.
- Other products for dry scalp conditions are often messy and difficult to use.



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imuDERM *Hair wash*

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IMUDERM HAIRWASH ACTUALLY
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Also in the IMUDERM range are:-

- Hand and Face Wash
- Body Wash
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- Shower Gel

For a free trial offer of the IMUDERM Hairwash and a 50g tube of IMUDERM Cream worth £5.40 at RSP, simply complete and post the coupon below.

Complete the following in BLOCK CAPITALS and send to Goldshield Healthcare, P.O. Box 801, Thornton Heath, Surrey CR7 7XT.

Your Name..... Address

Postcode

Tel. No. Signature

**FREE
trial offer**

One application per household from any source, UK and Northern Ireland addresses only. Please allow 4-6 weeks for delivery. Closing date 30th April 1994.

Hawaiian Tropic encourage a "safe-in-the-sun" policy

Medium protection factors are the fastest growing area of the sun care market and this trend is reflected in Hawaiian Tropic's new products.



The company has introduced an SPF10 and an SPF15 lotion, positioned to encourage a "safe-in-the-sun" policy.

In addition, the SPF rating of their children's product, Baby Faces and Tender Places, has been increased to 25. A new formulation with enhanced fragrance makes the product easier to rub in, says the company.

Other plans for the Summer season include a new look for the range's eight-hour waterproof Sports Lotion and an improved fragrance for the Light and Dark Self-tanning Lotions introduced last year.

The Hawaiian Tropic Tanning Advice Bureau is available to answer any suntanning queries from 9am to 5pm on Monday to Thursday and 9am to 1pm on Fridays on 0500 232012. Warner-Lambert Health Care. Tel: 0703 620500.



High strength cod liver oil liquid

Seven Seas have introduced a new product to their fish oil range — high strength cod liver oil liquid.

The company thinks this will be the first-ever liquid product to contain 50 per cent more EPA, the ingredient thought to help prevent joint stiffness. It also contains 100 per cent of the new European RDAs for vitamins A, D and E.

The new liquid comes in two sizes — 150ml,

£1.99, and 300ml, £3.29. It will be supported by TV and Press ads.

Cod liver oil is the UK's biggest selling health supplement and 30 per cent of users take it to relieve arthritis and 36 per cent to relieve joint pain and stiffness, say Seven Seas.

Other fast-growing market sectors include garlic, evening primrose oil and vitamin E. Seven Seas Health Care Ltd. Tel: 0482 75234.

Now Junior can have his own Mouth Guard

Building on the success of Macleans Active Mouth Guard, SB have introduced a product specifically for children.

Junior Mouth Guard is said to be the only children's mouthwash to contain CPC, an antibacterial ingredient which fights plaque, as well as fluoride to help strengthen teeth.

The flavour of the



new product has been formulated for younger taste buds, while the subtle minty aftertaste makes it seem sufficiently grown-up to encourage older children to use it. The aim is to make slooshing with mouthwash a fun part of the daily oral care routine.

Macleans Junior Mouth Guard has already proved popular in Germany, where it was launched in 1992.

The new product will retail at £1.99, but trial sizes of 75ml will be available for £0.49. Smithkline Beecham Consumer Healthcare. Tel: 081-560 5151.

Pepcid AC is Centra Healthcare's OTC H₂-antagonist for heartburn

Pharmacy assistants now have a new category of medicine to come to terms with — H₂-antagonists for the treatment of heartburn, dyspepsia and excess acid.

Changes in Government regulations mean that two H₂-antagonists have been transferred from prescription-only status to being made available over the counter in pharmacies.

One of these is Pepcid AC, the active ingredient of which is

famotidine 10mg.

Heartburn and dyspepsia are common conditions affecting about 9.3 million people in the UK each year. Symptoms are caused by too much acid being produced by the stomach, which can then get into the wrong place causing pain and discomfort. One tablet of Pepcid AC can control this acid for up to nine hours.

The recommended dose to relieve symptoms is one tablet; or a single tablet can be

taken one hour before eating, for those symptoms known to be associated with certain food or drink. The maximum daily dose is two tablets and treatment should not continue for more than two weeks.

Treatment with Pepcid AC is not suitable for everyone. For details of who should be referred to their doctor, see the article on page 22.

Pepcid AC is generally well-tolerated, but occasional

side-effects include headache and dizziness. Less commonly, treatment can cause dry mouth, nausea, constipation or diarrhoea, fatigue and allergies. It is not recommended for use in pregnancy.

Pepcid AC comes in three pack sizes — two tablets, £0.75; six, £1.99; or 12, £3.59.

Training manuals for pharmacy assistants are available from the company. Centra Healthcare. Tel: 0494 450778.



After Flex, it's now Flex 'n' Direct for Aquafresh

With the introduction of Aquafresh Flex being hailed as the most successful toothbrush launch of 1992, how were SB going to follow that? The answer is with Aquafresh Flex 'n' Direct.

"The most effective, modern solution to the prime consumer oral care requirement — thorough teeth cleaning" is how SB describe the new brush.

It has a directable head which moves with brushing to reach and clean awkward areas of the mouth.

The other key benefit

is kindness to gums, even if the person brushes vigorously, says the company.

Aquafresh Flex 'n' Direct comes in two head sizes — compact

and standard. There is a choice of six colours. It will be sold initially at £1.99.

Smithkline Beecham Consumer Healthcare. Tel: 081-560 5151.





ex, Janssen's threadworm treatment, containing mebendazole, is now available in a family pack. Originally, the product was only available as single tablets, but the new pack of four tablets, **£5.99**, emphasises the need for family use to reduce the risk of cross-infection. The launch will be supported by professional and consumer educational campaigns and a school's programme. Leaflets and point-of-sale material will also be available. Janssen Pharmaceuticals. Tel: 0235 777333.

et writing with Cystopurin

he Consumer Health is running two promotions for their Cystitis product, Cystopurin, this Spring. For every order for 10 cases of Cystopurin, Roche direct with the company, pharmacists or pharmacy assistants are entitled to a

complimentary writing set. Counter display units are also available direct from wholesalers. This holds six packs of Cystopurin and customer leaflets. Roche Consumer Health. Tel: 0707 366000.



continued research into what mothers are looking for in terms of baby drinks has led Unilever's Borden Beecham to launch Sugar-free Baby Ribena in a handy, ready-to-serve carton. It combines the traditional blackcurrant flavour of Ribena with the taste of natural fruit in a completely sugar-free formulation, which is also rich in Vitamin C. The single serving comes in a light, breakable pack with a tab for easy opening. Unilever research has shown that 85 per cent of mothers rate a sugar-free formulation as critical or very important when buying a baby drink. Unilever Beecham Nutritional Healthcare. Tel: 081-560 5151.

Neutralia respects skin's eco-system

Neutralia Dermo-Protection is a new range of products said to respect the skin's eco-system. Laboratoires Garnier have identified three elements of the skin — the pH balance, the hydrophilic film and the skin's bacterial flora — which makes up the eco-system. If anything happens to one of these, the eco-system breaks down and the skin can take days to recover. Neutralia products are colourless, soap-free, pH neutral, hypo-

Medinex for a good night's sleep

Medinex is a new liquid sleep aid produced by Whitehall Laboratories. It is recommended for temporary sleeping problems.

Each 5ml of the new product contains 10mg of the antihistamine diphenhydramine. The recommended dose for adults is 10-25ml at bedtime or after retiring, if the person is still having difficulty sleeping.

Diphenhydramine should not be taken by patients with narrow-

angle glaucoma, asthma or chronic pulmonary disease. It interacts with monoamine oxidase inhibitors, alcohol and sedatives.

Medinex comes in 100ml bottles retailing at **£3.19**. Each pack contains a measuring cup and a leaflet entitled "The Good Sleep Guide" with advice from a clinical psychologist on how to establish a good sleeping pattern. Whitehall Laboratories Ltd. Tel: 0628 669011.



Get some savvy with Savlon and win prizes with display material

"Apply some savvy, apply some Savlon" is a phrase that could become familiar over the next six months. Zyma have launched their biggest-ever poster campaign using this catchline.

They are also running a six-month "display and win" competition for pharmacy assistants, and relaunching some of their products.

Savlon is 40 years old this year and the company is using the opportunity to educate consumers about all the uses it can be put to.

Nine advertising posters will be displayed across the country, each one emphasising a different use for Savlon, such as first aid, spots or adding to bath water.

Changes to the range will see the cream being repackaged in laminar tubes, the 30g size offering 10 per cent extra free, and changes to Savlon liquid.

The large volume liquid is now called concentrated disinfectant, while the two smaller sizes are called concentrated antiseptic.

The competition for assistants revolves around the point-of-sale material. Each piece will have a unique number printed on the back. Look out for the winning numbers in the next issues of *OTC* and, if your number matches, you could win a television, hi-fi or even a trip to Paris. Zyma Healthcare. Tel: 0306 742800.

allergenic and contain a hard water softener.

The range includes four frequent-use shampoos — for normal, dry/damaged, fine/fragile and greasy hair. All retail at **£1.99**.

There are two soap-free facial washes,

£2.99, for normal/dry and for greasy/combination skin, a hand wash, **£1.99**, a softening foam bath, **£2.99**, and two soap-free shower gels, **£1.99**, for normal and dry skins. Laboratoires Garnier. Tel: 071-937 5454.

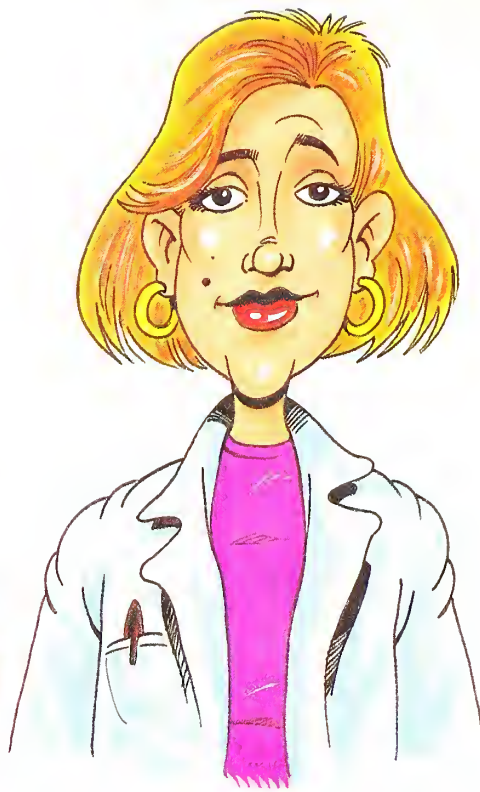


Unichem launch own-brand antihistamines

With nearly a quarter of people aged between 15 and 44 years thought to suffer from hayfever, Unichem have decided to launch an own-brand treatment in time for the peak pollen season.

The tablets contain terfenadine 60mg and so avoid drowsiness. They can also be used to treat allergic rhinitis, allergic skin reactions, insect bites and stings, and nettle rash.

The tablets will sell at **£2.15** for a pack of ten. Unichem Plc. Tel: 081-391 2323.



After trying all week, without success, to persuade my boss to do something about the steady build up of used needles and syringes returned to the pharmacy, I decided to get something done myself.

Once the used syringes and needles were in yellow dump bins there was the problem of how to dispose of them safely. This is something that has never really occurred to me before and after much phoning it became clear that this was more of a problem than I first realised. Neither the local health authority nor the Family Health Services Authority wanted to take responsibility or knew what to do with the bins. Eventually I was given a name and address to contact to request a collection for disposal.

Although everyone I spoke to was very helpful, generally knowledge of the problem was limited. What do diabetics, doctors' surgeries or nursing homes do, I wonder? They must all have to dispose of

used needles somehow. Anyway, I can now report that the boss is writing a letter and hopefully it won't be too long before a collection is made.

This performance got me thinking about how we dispose of other waste things in the shop. Thankfully, much of it is easier than used needles. At the moment, all our rubbish goes into one bin and all cardboard is dumped outside and collected twice a week. What I have suggested is we have two bins, one for glass and one for paper and that we recycle the cardboard by sending it back to the warehouse twice a week. I could quite get into this "green" lark! Although my boss is not a great one for change, he is prepared to give it a trial for one month.

Disposal of unwanted medicines has been solved by using the DOOP system, which seems to work fairly well. The bins supplied take virtually all forms of drugs with the exception of aerosols and creams. These are collected three or four times a year and new bins supplied in their place. Nice and easy, I think.

As promised in my last article, I said I would let you know how I got on giving up smoking. Well I'm pleased to say I'm still off the evil weed but I think I'll be reaching for the Slim-fast soon, or buying a new wardrobe, to cope with the extra half a stone I've put on! Oh well, can't have everything, I suppose.

MEANWHILE...

BY BAM!



CONASE HAYFEVER.
 aqueous Nasal Spray.
 beclomethasone
 (propionate)
 essential information.
 presentation Aqueous Nasal
 spray containing 50 micro-
 grams beclomethasone
 (propionate) per spray.
 uses Treatment of seasonal
 rhinitis (hayfever). Dosage
 and administration For
 intranasal use only Two sprays
 to each nostril every
 morning and evening. For use
 by adults and children aged
 twelve years and over.
 Contraindications Hayfever does not
 cause drowsiness. There are
 no known interactions with
 other medicines. Contra-
 dications Hypersensitivity
 precautions If hayfever
 symptoms have not improved
 after 10 days, consult the
 doctor. Pregnancy and
 lactation Consult
 doctor before use.
 Side effects
 dryness and
 irritation of the
 nose and throat,
 unpleasant smell
 and taste, and
 sinusitis have
 been reported rarely.
 There are cases of raised
 intra-ocular pressure
 and glaucoma have been
 reported. Retail selling price
 per pack with 100 sprays - £4.99
 Legal category P. Date of
 preparation 14 December 1993.
 Further information is
 available on request from:
 Allen & Hanburys Limited,
 Uxbridge, Middlesex UB11 1BT.
 Product licence number
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 holder Glaxo Pharmaceuticals
 UK Ltd, Stockley Park,
 Uxbridge, Middlesex UB11 1BT.
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WHY THIS SUMMER COULD MEAN NEW FREEDOM FOR YOUR HAYFEVER CUSTOMERS



powerful anti-inflammatory agent

Beconase® Hayfever™ - for the relief of seasonal allergic rhinitis (hayfever) - is the first anti-inflammatory intranasal corticosteroid available without prescription. It is a logical treatment for the inflammatory response to pollen¹ that leads to hayfever symptoms.

providing proven relief

Beconase® Hayfever™, which has been shown to provide better overall control of hayfever symptoms than both terfenadine and sodium cromoglycate,^{2,3} starts working immediately building up to its maximum protective effect over 2 to 3 days.

suitable for majority of adult sufferers

This direct action and powerful relief means you can recommend Beconase® Hayfever™ with



confidence as a first-line treatment to the 4 out of 5 hayfever sufferers who have mostly nasal symptoms.⁴

Easy-to-use with wide margin of safety

Furthermore, the twice-daily atomised dose of Beconase® Hayfever™ gives continuous relief from the symptoms of hayfever without causing drowsiness or interacting with other medicines or alcohol.

New freedom from hayfever

Beconase® Hayfever™ - utilising power previously available only on prescription - means new freedom for hayfever sufferers from the start of their symptoms this summer.

Beconase®
hayfever™

POWER PREVIOUSLY AVAILABLE ONLY ON PRESCRIPTION



ALLEN & HANBURY'S

WARNER
LAMBERT
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March 1994

What's the most effective NRT for highly dependent smokers?



“In the most highly nicotine dependent smokers (craving a cigarette on waking) nicotine 4 mg gum seems the most effective form of replacement therapy at present.”

(Analysis of the results of 28 randomised trials of nicotine 2 mg chewing gum, six trials of nicotine 4 mg chewing gum, and six trials of nicotine transdermal patch.)¹

NICORETTE®

 *Helps through the hard times*

Pharmacia Pharmacia Ltd., Davy Avenue, Milton Keynes, MK5 8PH.

1. Tang JL, Law M, Wald N. *BMJ* 1994, 308: 21-6

Product Information: Presentation: Nicorette Mint Plus contains 4 mg of nicotine in a chewing gum base. **Indication:** An aid to smoking cessation. **Dosage and Administration:** Each piece should be chewed slowly for 30 minutes. After 3 months ad libitum dosage, Nicorette Mint Plus should be gradually withdrawn. Maximum recommended daily dose: 15 x 4 mg pieces. Not suitable for children. **Precautions:** Peptic ulcer, gastritis, angina, coronary disease. **Contra-indications:** Pregnancy. **Adverse effects:** Occasional hiccups, indigestion, hypersalivation, throat irritation. **Package Quantities:** Boxes of 105 and 30 pieces, in blister strips of 15 pieces. £3.98 (30), £10.80 (105) (trade price correct at time of printing). PL No: 0022/0113: held by Pharmacia Ltd., Milton Keynes, MK5 8PH.